



PERRY HIGH SCHOOL

PRIDE ♦ PROGRESS ♦ PURPOSE

➔

Student Name _____
Grade _____ Student ID # _____

****MUST BE RETURNED DURING PUMA DAYS!!**

✘ Please sign in all spots indicated (front and back) and return to your child's school

PERRY HIGH SCHOOL 2018-2019 STUDENT CITIZENSHIP CONTRACT

_____, a Perry High School student in grade _____, and my parent/guardian, _____, understand and accept the responsibilities outlined in the Perry High School Student Code of Conduct section of the Student Planner. We agree to abide by the Code and fully understand the consequences outlined. We acknowledge having read and understand this Citizenship Contract and assure that the student named below will abide by the rules and regulations contained herein.

We understand that we can view the student handbook on the PHS website @ <http://www.cusd80.com/Domain/3255>. We also understand that we can request a hard copy from the administration office.

✘ Student Signature

✘ Parent Signature

Date

PHS 2018-2019 PERMISSION TO PUBLISH

_____, a Perry High School student, my parent/guardian, _____, agree to allow Perry High School to use pictures or likeness of my son and/or daughter in school publications, yearbook, school websites, school advertisement, Facebook, Instagram, Twitter and/or newspaper/TV depicting Perry High School. *If denied, your student WILL NOT appear in the yearbook.

✘ Student Signature

✘ Parent Signature

Date

See reverse side for additional
required documentation ➔



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**PARENT PERMISSION FORM
 FOR INTERNET ACCESS 2018-2019**

PART A

Do you give your daughter/son permission to participate in Internet Activities?

✘ Please initial your preference below

Yes No
 (Go to Part B) (Do not go to Part B/Sign Here)

PART B

Student User Agreement and Parent Permission Form

Student: I understand and will abide by the usage rules set forth by the Student Handbook. I understand and will abide by the provisions and conditions indicated. I understand that any violations of the above terms and conditions may result in disciplinary action and the revocation of my use of information services.

Student Name (Please Print): _____ Grade: _____

User Signature: ✘ _____ Date: _____

Parent/Guardian: As the parent/guardian of the above named student, I have read the Student Handbook and understand it. I understand that it is impossible for the school district to restrict access to all controversial materials, and I will not hold the district responsible for materials acquired by use of electronic information services (EIS). I also agree to report any misuse of the EIS to a district administrator. (Misuse may come in many forms, but can be viewed as any messages sent or received that indicate or suggest pornography, unethical or illegal solicitation, racism, sexism, inappropriate language, or other issues described in the agreement).

I accept full responsibility for supervision if, and when, my child's use of the EIS is not in the school setting. I hereby give my permission to have my child use the electronic information services.

Parent/Guardian Name (Please Print): _____

Signature: ✘ _____ Date: _____

**Bring Your Own Technology (BYOT)
 Agreement: Parental Notification and Consent (See Page 4 & 5)**

I understand and will abide by the above policy and guidelines, in addition to any applicable Governing Board Policies, Administrative Regulations, and State and Federal laws concerning the use of technology. I further understand that any violation may result in the loss of my network and/or BYOT privileges, as well as other disciplinary action, and/or legal action in accordance with law and Board policy.

Student ID No. _____

Student (Print Name) _____

Student Signature ✘ _____

Parent (Print Name) _____

Parent Signature ✘ _____

Date _____

NOTE: To download and keep your own copy of this policy, please visit <http://cusd80.com/BYOT> at any time.

Student Confinement: Parental Notification and Consent (see page 5)

By signing this form, you are acknowledging and verifying that you have read this notification. Please indicate your agreement or disagreement for confinement of your child during the 2018-2019 school year in the event it becomes necessary for disciplinary purposes if your student poses imminent physical harm to him/herself or others.

I have read this notification and agree/disagree to the following: **Select one below**

I agree to allow the District to confine my child for disciplinary purposes.

I do not agree to allow the District to confine my child for disciplinary purposes.

Student Name (Please Print) _____

Parent/Guardian Signature ✘ _____ Date _____