

Student Name: \_\_\_\_\_ Teacher \_\_\_\_\_ Grade Level \_\_\_\_\_



### 2016-2017 Confirmation of Receipt of Handbook Information

Please return this form to the Connections teacher (MS/HS only), classroom teacher (Elem) or to the Main Office by Friday, September 12, 2016 or upon enrollment.

1. Great Fall District Student Handbook can be located under "Parents & Students" at:  
[www.gfps.k12.mt.us/districtinformation/studenthandbook](http://www.gfps.k12.mt.us/districtinformation/studenthandbook)

2. Please initial a delivery method below IF you wish to receive a printed copy of the handbook:

\_\_\_\_\_ I would like a printed copy of the handbook sent home with my child.

\_\_\_\_\_ I would like to come to the school to pick up a printed copy of the handbook in the Main Office.

3. Confirmation of receipt of handbook information

- ✓ I am aware that the electronic handbook contains information I will need to know during the school year. I understand that students are held accountable for their actions.
- ✓ I understand that the Acceptable Use Policy (AUP) is included herein. If a student violates the agreements in the AUP, the consequences could include suspension of computer privileges and/or disciplinary or legal action. I also understand that using the computer network is a privilege and with that privilege comes responsibility.

4. Health Care Information

If your child has an ongoing medical condition that may require medical attention while at school, please check "yes" below. A Health Care Plan form will need to be filled out at your child's school. Examples include: migraines, seizure disorder, need for an inhaler -- even if the student manages the inhaler him/herself, etc.

\_\_\_\_\_ **YES, my child has an ongoing health concern. If your child is in need of a Health Care Plan, please contact your school secretary.**

5. Release of Student Information

Regarding student records, federal law allows GFPS to release a variety of information about your child **unless you opt out by returning the form below.**

Specific student information might be released in the following ways:

- Listing your child's name on party lists (Valentine's Day, etc...)
- Posting of your child's birthday on a birthday bulletin board
- Printing of your child's name and picture in the school yearbook
- Publishing of awards or accomplishments in the Tribune or school newsletter (Honor Roll lists, GPA lists, Student of the Week)
- Photographing, filming and/or interviewing your child for social media websites and/or by the local TV stations or the Tribune for educationally related stories.

- Printing your child's name in the programs for music concerts and other holiday programs, award ceremonies, Geography Bee, Spelling Bee, Academic Bowl, math contests, Mathlete and art contests.
- Listing your child's name for team or activity rosters (may include height, weight, and year in school)
- Providing information to the military recruiters upon their request.
- Providing information to college and athletic recruiters upon their request.

As a matter of practice, we do not release information to persons or agencies that do not have a special need to know. In exercising your right to limit release of this information, you must fill out this page and return it to school by **September 12, 2016 or upon enrollment.**

**Fill out the following checklist:**

I am requesting that, until my son/daughter reaches the age of 18 when he/she may decide for him/herself, the Great Falls Public School District **NOT RELEASE** student directory information to the following entities that have an "X" placed in the box.

*Be aware that you are checking the box if you DO NOT want your child's name included.*

- I do not want my child's student directory information released to ANYONE (including the yearbook and ALL other options listed below.)
- I do not want my child in the School Yearbook (school picture and name), event programs, or other such publications
- I do not want my child in the Great Falls Tribune, TV news stations, other media (including lists for honor roll, student of the week)
- I do not want my child in electronic media (school web page, social media websites, videotaping)
- I do not want information released to Institutions of higher learning (colleges, universities, & trade schools-HS Only)
- I do not want information released to potential employers
- I do not want information provided to military recruiters
- I do not want my child in the list of graduates (given to the Great Falls Tribune-HS Only)
- I do not want my child in the graduation program (handed out at graduation to all attendees-HS Only)
- I do not want Class T-shirt (all senior names generally go on the back of a shirt that they receive with their all-night party ticket-HS Only)
- Other - please specify \_\_\_\_\_

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\_\_\_\_\_  
Student Name Printed

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date