

## DECATUR PUBLIC SCHOOLS PARENTAL/GUARDIAN CONSENT FORM

### FIELD TRIP PERMISSION

In connection with class work, there may be some occasions when classes will visit places of educational interest in Decatur or immediately surrounding the city. These visits will be during the school day and will ordinarily require not much more than an hour's time. They will be taken by school bus, unless an infrequent occasion requires the use of private cars, or walking a short distance. The children will always be carefully supervised.

**PLEASE NOTE: Illinois Department of Public Health regulations require parents to be notified of any accident where Emergency Medical services are called (Ambulance, Fire department, etc.). Even if your child is not injured, he/she must be taken to the emergency room if the parent or legal guardian cannot be contacted. It is imperative that we know how to reach you. Please inform us of all phone or pager numbers where you can be contacted. If you cannot be contacted you will have to pick up your child at the hospital emergency room in the event of an accident.**

May we have permission for your child to accompany the class on these short visits during his/her years in elementary school with the Decatur Public Schools? This permission will be made part of your child's folder.

\_\_\_\_ **YES**, my child has permission to accompany his/her class on field trips throughout or in the surrounding Decatur area. I understand that transportation may be by school bus or in automobiles driven by teachers or parents.

\_\_\_\_ **NO**, my child may not accompany his/her class on field trips throughout or in the surrounding Decatur area.

**\*WOULD YOU BE ABLE TO TRANSPORT CHILDREN ON FIELD TRIPS WHEN BUSES ARE NOT AVAILABLE?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**\*\*Field Trip Permission forms specifying the location, time and other needs will be sent home prior to the trip. The completion of these forms will be necessary to allow your child to participate in this educational experience.**

### PUBLICITY PERMISSION

We are proud of Decatur Public Schools and the wonderful programs and events that happen throughout the year. Therefore, we are asking for your support in our efforts to publicize our successes.

\_\_\_\_ **YES**, my child has permission to participate in any videotaping, newspaper articles, district website and publications, TV coverage, or any use by media, for Decatur Public Schools publicity.

\_\_\_\_ **NO**, my child may not participate in any videotaping, newspaper articles, district website and publications, TV coverage, or any use by media, for Decatur Public Schools publicity.

### AUTHORIZATION FOR ACCESS TO DISTRICT COMPUTER SYSTEM BY STUDENTS

This form must be read and signed by each student (and if under age 18 by his/her parent/guardian) as a condition of using the District Internet System and all media equipment.

By signing this Authorization, I acknowledge that I have received a copy of the "Internet and Technology Use Policy" that is outlined in the Code of Conduct handbook, and that I have read, understand, and agree to follow the Guidelines. I acknowledge that access to the District Internet and Technology System is provided as a privilege by the District and that inappropriate use may result in discipline.

I ACKNOWLEDGE THAT I HAVE NO EXPECTATION OF PRIVACY IN MY USE OF THE DISTRICT COMPUTER EQUIPMENT, AND THAT THE DISTRICT HAS THE RIGHT TO AND DOES MONITOR USE OF THE SYSTEM.

**STUDENT NAME:** \_\_\_\_\_ **GRADE/ID#** \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_

Please return to your child's school.

Revised Jan. 31, 2017