ELEMENTARY SCHOOL STUDENT/PARENT AGREEMENT

The Board of Education reserves the right to modify or discontinue any or all District policies and procedures or initiate new policies and procedures as a result of orders or declarations of either the federal or state governments, the Mississippi Department of Education or emergency declarations or emergency circumstances.

This	is to	certify	that I:
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- (1) Have reviewed the entire contents of this student handbook.
- (2) Agree to abide by the Acceptable Use Policy for Internet/email
- (3) Device annual usage fee is non-refundable and fees will be assessed for damages.
- (4) Will allow my student to be transported by bus within district.

Print Student Name	Student Signature			
This is to certify that I:	:			
1)	Will allow my student's full name, photograph or work to be p school yearbooks and the school directory without liability to t or Madison County Schools.			
	YES NO			
2)	Will allow my student's full name, photograph or work to be p school or district websites, local papers, television or social me without liability to the school or Madison County Schools.			
	NO			
Print Parent/Guardian	Name			
Parent/Guardian Signa	ature			
Date Signed				
School Name				

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Complete this form as directed, detach and return to your student's homeroom teacher.

MIDDLE AND HIGH SCHOOL STUDENT/PARENT AGREEMENT

The Board of Education reserves the right to modify or discontinue any or all District policies and procedures or initiate new policies and procedures as a result of orders or declarations of either the federal or state governments, the Mississippi Department of Education or emergency declarations or emergency circumstances.

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- (1) Have reviewed the entire contents of this student handbook.
- (2) Agree to abide by the Acceptable Use Policy for Internet/email
- (3) Device annual usage fee is non-refundable and fees will be assessed for damages.
- (4) Will allow my student to be transported by bus within district.

Print Student Name		Student Signature			
This is to certify that I:					
1)	 Will allow my student's full name, photograph or work to be published o school or district websites, in school yearbooks, local papers, school directory, television or social media without liability to the school or Madison County Schools. 				
	YES	NO			
Print Parent/Guardian	Name				
Parent/Guardian Signa	ture				
Date Signed					
School Name					
Complete this form as	directed, detach and return	to your student's homeroom teacher.			