



				Signature Verit	fication of Receipt of Documents/Release of Information
Student Name (Last name, first name) Parent Name (Last name, first name)		Parent Name (Last name, first name)	ne)		Grade
Address		Home Phone		School	
City, Zip Code		Parent/Guardian Work Phone		Teacher (Grades K-5 only)	
Afte	r reviewing the Facts for Parents booklet, student ar	nd parent/guardian must check each	n section,	sign, and return this form to the sch	pol office.
1.	DISCRIMINATION, HARASSMENT & BULLYING (Facts for Parents: Section B) By checking each circle and signing below, I acknowledge the following: My student and I have read and understand the Discrimination and		3.	9 9	elow, I acknowledge that my student has read and e Policy, and that my student and I understand the
	Harassment Policies section. My student and I understand the consequences sl violate the policy. I have been informed of these rights.	My student and I understand the consequences should my student violate the policy. I have been informed of these rights. DTOGRAPHY/VIDEO/MEDIA RELEASE * Ing the school year, schools have events the news media and the district may want to ure. A representative may be on campus to gather photographs and/or video footage. Idition, parents and students may take photos of events in classrooms or around roles. These photos may be posted on the Internet or otherwise distributed without the hission of the school. Your child's participation in these events is valued, and parent roles in seeded to include him or her in events where photography may take place. Inthick, Guardians who prefer that their child not be photographed or videotaped must be their school by using this form. Schools make every effort to ensure the wishes of corrent/guardian. Please be aware that photographing and videotaping by a device as a cell phone may take place without the knowledge of the teacher, principal or		(Facts for Parents: Section C) California law requires that parents/gu	OLICIES ACKNOWLEDGEMENT uardians of each pupil acknowledge having been tion C "Facts for Parents: Health Requirements."
Dui fea In a sch per Par not the suc dist	feature. A representative may be on campus to gather In addition, parents and students may take photos of eschools. These photos may be posted on the Internet of permission of the school. Your child's participation in the permission is needed to include him or her in events with Parents/Guardians who prefer that their child not be phonotify their school by using this form. Schools make even the parent/guardian. Please be aware that photographis such as a cell phone may take place without the knowled district staff. Please check all that apply or opt out by selecting to be a great of the property of			of these rights. TECHNOLOGY/NETWORK A (Facts for Parents: Section K) The "Network Use Guidelines" for Sar be signed before the student is given Student Connect. By checking this box and signing the rules and conditions outlined Internet. By checking this box and signing	Diego Unified School District is a contract and must access to the district's network (SanDiNet) and below, I, the student, understand and will abide by in Section K for access to SanDiNet and/or the below, I, the parent/guardian, give permission for my Net, the Internet and Student Connect.
	I give my permission to have my student photographed by the district or school. Photos may be used on school or district website or brochure. I give my permission to have my child videotaped by the district or school. Videos may be viewed by district staff or public. The district or school can provide credit to my child if his or her work is highlighted. I DO NOT want my child photographed or videotaped. * Update your media release preferences at any time by contacting your school office.		6.		- 5 and signing below, I the student, and I the parent, dge the policies and rights outlined above and s. Date
				i di Sili Sudi didi i Signataro	Date