

August 27, 2008

Dear Solon Middle School student and parent/guardian:

Each school year, students receive three important documents that must be signed by the students and their parents. They include:

- The Solon City Schools Code of Conduct information (in student Agenda)
- The Solon City Schools Acceptable Technology Use policy (in student Agenda)
- The Solon Middle School Video/Photography Release form (found below)

To streamline this process, Solon Middle School has produced one form of consent, found on the back of this sheet, to cover each of these three documents, which were discussed at orientation meetings this week.

Please take a moment to review these three documents with your child, sign all three consent form sections, and **have your child return the consent form to his or her social studies teacher no later than Friday, August 29, 2008**. If you have any questions or concerns, please call the Solon Middle School office at (440) 349-3848.

Thank you.

Scott Hatteberg
Assistant Principal
Solon Middle School

Solon Middle School Video/Photography Release Form

In keeping with the Solon School District's commitment to technology and the Strategic Plan, **Solon Middle School** has increased their in-house video programming capability with video editing and digital photography. This technology will enhance the everyday learning process for students in the school environment.

Examples of our commitment would be providing students the opportunities to integrate technology into the curriculum with video cameras and digital photography. With this in mind we want to be sure that we know your wishes as far as releasing video footage and/or photographs of your students in our school. You should note that this agreement does not include images which may be captured at school-wide events aired on Channel 22.

1. I hereby give Solon Middle School the right to use video footage and/or photographs of my student.
2. I agree that the video footage and/or photographs will be the property of the school and I waive all rights including the right to inspect and/or approve copy or voice commentary that may be used in conjunction with uses to which they may be applied.
3. The pictures and/or video footage may be used as the Solon School District sees fit in the publication of educational or promotional materials and for any other lawful purpose.

CONSENT FORMS (please detach and return to your child's social studies teacher)

Please print child's full name: _____ Grade/Team: _____

I have received a copy of the Solon City Schools Code of Conduct, Acceptable Technology Use Policy, and Video/Photo Release form for 2008-2009. I understand that these three documents contain information my child must abide by during the school year. I also understand that all students will be held accountable for their behavior and will be subject to the disciplinary consequences outlined in the Code of Conduct and documents.

CODE OF CONDUCT HANDBOOK

I have received and read the Solon City Schools **Code of Conduct Handbook** in the student Agenda book.

Signature of Student

Signature of Parent or Guardian

Date

ACCEPTABLE TECHNOLOGY USE POLICY

Student Acknowledgment:

I have carefully read, understand and agree to comply with the Solon City Schools' **Acceptable Technology Use Policy**. I understand that I am personally responsible for acts or omissions in connection with utilization in derogation of this policy. I further understand that violation of this policy may result in loss of user privileges, administrative discipline and may constitute a criminal offense.

Signature of Student

Date

Parent or Guardian Consent:

As the parent or Guardian of this student, I have read Solon City Schools' Acceptable Technology Use policy and understand that, with my consent, my child will be given access to the Internet by Solon City Schools. I understand that permitted access to the Internet is for educational purposes. I recognize that while every reasonable attempt will be made to monitor and insure that my child complies with the Acceptable Technology Use Policy, it is impossible for the school to restrict access to all controversial material. I understand that the faculty and administrators of Solon City Schools are available to provide information and answer questions regarding the Internet and acceptable use so that I may make an informed decision to provide my consent.

I hereby consent and give Solon City Schools permission to grant my child unrestricted Internet access and agree that Solon City Schools is not responsible or liable for materials, some of which may be objectionable, that my child may access while using the Internet.

Signature of Parent or Guardian

Date

Video/Photography Release Policy

Give Permission

I/We give permission for our child to be Videotaped or Photographed.

Signature of Parent or Guardian

Date

***** OR *****

Do Not Give Permission

I/We do not give permission for our child to be Videotaped or Photographed.

Signature of Parent or Guardian

Date