

HINSDALE

SCHOOL DISTRICT

PO Box 27

Hinsdale, NH 03451

603-336-5332 HES or 603-336-5984 HMHS

FAX 603-336-7522 HES or 603-336-7497 HMHS

This information is extremely important please make sure to answer every question. Thank you.

Parent/Student Permission Signature Form

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Acceptable Use Policy

As a user of the Hinsdale School District's computer resources, I agree to follow the rules of the Acceptable Use Policy (AUP). As the parent/guardian of the above student, I grant my son/daughter permission to access computer services. See page 38 in the Student Handbook.

I have read this policy and discussed it with my child.

____ **Parent initials**

Hinsdale School District Student Handbook

I have read and understand the policies, practices and responsibilities outlined in the Hinsdale School District Handbook. Also found at <http://www.hnhsd.org/files/handbook.pdf> each family will receive one copy of this handbook, the most up to date handbook can be found on the web site

____ **Parent initials**

Permission to Publish

See page 5 in the Student Handbook

Please **initial** only one below to indicate your choice:

____ YES, I will allow my child's picture, sound recording, movie or work to be published in both electronic and print format.

____ YES, I will allow my child's picture, or work to be published in print format but permission is NOT given for electronic format.

____ NO, I will not allow my child's picture, sound recording, movie or work to be published in both electronic and print format.

Your signature below acknowledges you have reviewed the above information. **Please make sure to have each student sign to the best of their ability. (Printing is permitted).**

Parent or Guardian signature _____ Date _____

Student signature _____ Date _____

Student signature _____ Date _____

Student signature _____ Date _____

Please have all names listed sign