

This form is for parents/legal guardians of all students enrolled in Jacksboro Independent School District (JISD) to ensure that they have received and reviewed the following important documents.

My signature at the bottom of this page verifies information as follows:

- **Receipt of Parent / Student Handbook**
- **Student Code of Conduct** – Parents and/or students have the option of receiving the Student Code of Conduct in electronic format (at: [www.jacksboroisd.net](http://www.jacksboroisd.net)) or hard copy.

**Student Code of Conduct (Please indicate your choice by checking the appropriate box below)**

- I choose to receive the Student Code of Conduct in **electronic format** and accept responsibility for accessing the document according to the instructions provided.
- I choose to receive a **hard copy** of the Student Code of Conduct. I will pick up the Student Code of Conduct at the Principal's office.

**Permission to access the District's electronic communications system (select only one option below)**

- My student may use the Internet while at school pursuant to the board policy and agrees to abide by the rule of the policy.
- My student may **not** use the Internet while at school.

**Electronic Display of Original Work (select only one option below)**

- My student's original class work may be electronically displayed or re-produced by JISD.
- My student's original class work may **not** be electronically displayed or re-produced.

**Electronic Display of Personal Information (select only one option below)**

- I give permission for certain personally identifiable information (first and last name only) and/or a photograph (team, group or individual images) of my child to be electronically displayed (on the school's website) and produced by JISD.
- I **do not** give permission for certain personally identifiable information and/or a photograph of my child to be electronically displayed and produced by JISD.

**Survey Permission Form (select only one option below)**

- I give permission for my child to participate in District approved surveys.
- I **do not** give permission for my child to participate in District approved surveys.

Print name of student \_\_\_\_\_ Grade Level \_\_\_\_\_

Signature of student \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent \_\_\_\_\_ Date \_\_\_\_\_

**Please sign this page and return it to the student's school.**