

**SOUTH NEWTON SCHOOL CORPORATION
INTERNET NON-CONSENT FORM**

All South Newton School Corporation (SNSC) students will now automatically receive Internet connectivity unless this form is signed and returned. Some parents/guardians may desire to restrict direct Internet use for their student(s). SNSC will honor such requests by substituting alternative activities in classes where school work requires direct Internet use. Direct Internet use is defined as: Student managed control of the Internet by personal contact with computer/technology equipment.

The staff of SNSC may display or use Internet gathered information in their classroom for use with all students regardless of consent status. Classroom viewing and materials selection from the Internet will be approved for student use in the same manner that other media is approved. Students with non-consent may be asked to work in group activities that require another member of the group to perform Internet research.

Your signature within this document is legally binding and indicates the party who signed has read the terms and conditions carefully and understands their significance in limiting direct Internet connectivity for their student(s).

INTERNET NON-CONSENT:

Please sign **if you object** to your student's direct use of the South Newton School Corporation Internet Connection.

As the parent/guardian of (please print student name) _____, (grade level) _____, **I do not give permission** for my son / daughter to directly use the South Newton School Corporation Internet Connection for any reason. I request that my son / daughter be assigned alternative activities not requiring direct Internet access. I understand that no grade reduction or other classroom penalties will apply by not giving consent for Internet access. I understand that my student may view Internet screens under the control of a staff member or use Internet gathered educational materials when accessed by staff or by students with teacher supervision.

Parent / Guardian Name (please print): _____

Signed: _____ Date: _____

Please return this form at Student Registration
OR mailed or faxed within 1 week of registration to:
Jeff Taylor, Director of Technology
South Newton School Corporation
13102 South 50 East
Kentland, IN 47951

phone: 219-474-5167 ext. 235 fax: 219- 474-6592 email: taylorj@newton.k12.in.us

**SOUTH NEWTON SCHOOL CORPORATION
DIRECTORY INFORMATION RESTRICTION FORM**

SNSC maintains records on all students. **Directory Information** means information contained in an education record of a student which would not generally be considered harmful or an invasion of privacy if disclosed. It can come in the form of but not limited to handwriting, print, computer media, video/audio, film, or website. It may however be released upon request to those persons or organizations or media whom SNSC deems worthy of this type of information. Directory information includes, but is not limited to the student's:

First and Last Name	Other educational agencies or institutions attended
Contact Information	Photographs of student or student schoolwork
Age/Grade level	Video of student or student schoolwork
Degrees & Awards received honor roll, attendance, athletic, academic, extra-curricular	Participation in school related activities & sports

Parents, guardians, or custodians may request that directory information not be released, in which case no information regarding the student will be released (see form below). SNSC will honor such requests by not releasing directory information about student(s) to any persons, organizations, or media (Newspaper, TV, Radio, Website - Local, State, National, Global).

Parents, guardians, or custodians will be notified annually at registration of their rights to restrict directory information. Your signature within this document is legally binding and indicates the party who signed has read the terms and conditions carefully and understands their significance in limiting the release of "directory information" of student records for their student(s).

DIRECTORY INFORMATION RESTRICTION FORM:

Please sign **if you object** to release of your student's directory information to any persons, organizations, or media (as defined above).

As the parent/guardian of (please print student name) _____, (grade level) _____, **I do not give permission** for any directory information on my son / daughter to be released to any persons, organizations, or media by the South Newton School Corporation. I understand that I may review my student's record of directory information at any time, and that I may annually review my rights to restrict the release of "directory information" for my student.

Parent / Guardian Name (please print): _____

Signed: _____ Date: _____

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