



Google Apps for Education Parent Permission
(Permission is required 5th-8th Grade Only)

By signing below, I confirm that I have read and understand the following:

Under FERPA and corresponding Michigan law, a student's education records are protected from disclosure to third parties. With regards to COPPA, I understand that my student's education records (projects, documents, email, files, username and password) stored in Google Apps for Education may be accessible to persons acting on behalf of Google by virtue of this online environment. This does not include any student demographic or grade information stored in our Student Information system. I also understand that my student's use of Google Apps for Education is governed by the Grand Haven School District Student Acceptable Use of Technology.

My signature below confirms my consent to allow my student to be assigned a Google Apps for Education email account. I understand that I may ask for my child's account to be removed at any time.

_____ YES, I give permission for my child to be assigned a full Grand Haven Area Public School District Google Apps for Education account. This means my child will receive an email account (grades 5-8), access to Google Docs, Calendar, and Sites (grades 5-8).

_____ NO, I do not give permission for my child to be assigned a Grand Haven Area Public Schools Google Apps for Education email account. This means my child will NOT receive an email account but will have access to the rest of the Google Apps.

Student Name: (Print) _____

Grade: _____

Parent/Guardian Signature: _____

Date: _____