

AP 334-1 Parental Consent Form for Online and Social Media Services

Abbotsford School District acknowledges the importance of teachers, students and parents collaborating and learning in digital environments. However, it is also important that students, staff and parents use such tools in a safe and ethical manner. (See Administrative Procedure 337: Social Media – Students and Parents).

Teachers may use a variety of social media sites with students, but are required by law to secure parental permission if such sites store information on networks outside of Canada. Students are encouraged to participate in such class activities, but are not required to use accounts on servers located outside of this country. Teachers will therefore provide a list of all non-Canadian services in the bottom section of this form, so that parents may consent for their child to participate in these social media activities.

Personal information will be collected by the School District for the above noted purposes under the authority of Section 26 (c) of the Freedom of Information and Protection of Privacy Act (FOIPPA). While stored outside the country, information in your child's account may be subject to the laws of foreign jurisdictions, such as the United States. If you have any questions about this collection, please contact your child's teacher directly.

Consent

I understand that my child's information will be disclosed, stored and accessed from outside of Canada, and specifically in the United States, for the online services and social media sites listed below. This consent will be considered valid from the date on which it is signed until the end of the school year. I also hereby acknowledge that I have read and understood the district's social media policy (Administrative Procedure A334), as well as the policies related to information and communication services (Administrative Procedure A417).

List of Online and Social Media Services Accessed During Classroom Activities	
1	
2	
o	
4.	
5.	
Name of student:	
Name of parent or guardian:	
Signature of parent or guardian:	
Date Signed: (MM/DD/YYYY)	



AP 334-2 Parental Consent Form for Office 365

Abbotsford School District provides students in Grades 4-12 with a district email account as well as 25 gigabytes of online file storage space for school files. Students will have their own secure login and password to access their email and files.

Personal information will be collected by the School District for the above noted purposes under the authority of s. 26 (c) of the Freedom of Information and Protection of Privacy Act (FOIPPA). If you have any questions about this collection, please contact the school principal.

Student names and the school they attend will be available to Microsoft Office 365 for Education who will store this account information on secured servers located outside of Canada. No personal addresses or phone numbers will be released. Privacy legislation requires that we obtain your consent before providing an account to your child. While stored outside the country, information in your child's Office 365 account may be subject to the laws of foreign jurisdictions, such as the United States.

Consent

I understand that my child's information in the Office 365 account will be disclosed, stored and accessed from outside of Canada, specifically the United States, for the purposes outlined above. This consent will be considered valid from the date on which it is signed until the student named below is no longer a student within the Abbotsford School District. I also hereby acknowledge that I have read and understood the School District's Policy on the Use of Office 365 as well as the Information and Communication Services Administrative Procedure 417 and the Social Media AP 334.

Name of parent or guardian:		
Signature of parent or guardian:		
Date Signed: (MM/DD/YYYY):		
This form must be returned, signed and dated, to the student's school in order for a District Office 365 account to be activated for the student named below. (Attach label)		
Student's First Name:	Student's Last Name:	
Student's School:	Grade: Course, Pod or Division:	