



## STUDENT INFORMATION CHANGE FORM

*This form should be completed during the school year to change information that was provided during the registration process or during the summer when parents confirm and update student information for the new school year.*

***Please complete only the applicable sections on this form and return it to the child's school.***

*FOR TRANSPORTATION CHANGES: Complete the Alternative Transportation Form*

*FOR MEDICATION/HEALTH PLAN CHANGES: Contact the child's school*

*FOR ADDRESS CHANGES: Complete the Student Address Change Form*

*The school will keep all forms on file for one year. The district will request electronic/online confirmation of information and/or updates every summer for the next school year.*

**Child's Name:** \_\_\_\_\_  
FIRST LAST

**Name of Person Requesting Change:** \_\_\_\_\_  
FIRST LAST

**Relationship of the Above Person to Child:** \_\_\_\_\_ **Child's School:** \_\_\_\_\_

### Add/Delete a Contact for a Student

Please check the appropriate boxes and provide the necessary information. **ONLY complete this section if you are adding or deleting a contact.**

**ADD**     **DELETE**    **the following person as a contact for this student:**

**Name:** \_\_\_\_\_  
FIRST LAST

**Address:** \_\_\_\_\_  
#    STREET    APT. #    CITY    ZIP

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**This person is:**     Legal Guardian     Emergency Contact     Authorized to Pick Student Up From School  
 Copied on School/District Correspondence     Living with Student

### Change Agreements

I wish to make the following changes to the agreements. **ONLY complete the sections for which you wish to change an agreement.**

<b>PTA/PTO Directory</b>	I permit that parent/guardian name and contact information to be included in the PTA/PTO directory.	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Internet Acceptable Use Policy for Students</b>	My student agrees to follow the Forest Hills School District AUP on the use of the network or internet, will use these tools in a responsible way, and will obey all the rules explained by the school.	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Internet Acceptable Use Policy for Parents</b>	I have read the Forest Hills School District AUP and grant permission for the student named above to access the network and internet. I understand that network and internet access is intended for educational purposes. I also understand that every reasonable precaution has been taken by the district to provide for online safety, but the district cannot be held responsible if students access unsuitable websites.	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Media and Publicity Exclusion</b>	My child may be featured in district publicity including advertisements, website, internet, district publications, educational videos, and media news stories.	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Family Educational Rights and Privacy Act (FERPA)</b>	I permit my child's name, birthdate, address, enrollment dates, phone number, email address, awards, height/weight, activity participation, gender, intended field of student, and grade level to be included in directories, as applicable, such as yearbook, group photos, phone directories, vendor lists, honor roll lists, sports rosters, institutions of higher education (ie: for scholarships), and activity programs.	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Military Services Opt-Out</b>	I permit that my student's name, address, and telephone number be released to Armed Forces, military recruiters, and/or military schools.	<input type="checkbox"/> YES <input type="checkbox"/> NO

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_