

Acknowledgment Forms Section – Requiring Signatures

FPMS & FPHS Digital Device Release Form

*Only Fort Payne Middle School and Fort Payne High School students and parents need to complete, sign and return this form.

Please check off to confirm that you received each of the following on your digital device.

_____ 1 Digital Device Barcode #: _____
_____ 1 AC Power Adapter
_____ 1 Protection Cover

All items must be returned on the date of separation from Fort Payne City Schools due to withdrawal, expulsion, or graduation. I understand that I will be charged for any missing equipment or cables.

Student

- I have read the Fort Payne City Schools Digital Device Acceptable Use Agreement.
- I agree to comply with the Fort Payne City Schools Digital Device Acceptable Use Agreement and the Yearly Usage Fee described within.
- I understand that I may lose my digital device privileges as a result of my inappropriate behavior, and may be financially responsible for intentional damage or avoidable loss of the Fort Payne City Schools' digital device.

Student - Print your name here: _____

Student - Sign and date here: _____, **date:** _____

Parent

- I have read the Fort Payne City Schools Digital Device Acceptable Use Agreement.
- I understand the procedures and requirements to which my student must comply as shown in the Fort Payne City Schools Acceptable Agreement.
- I agree to comply with the Fort Payne City Schools Digital Device Acceptable Use Agreement and the Yearly Usage Fee described within.
- I accept responsibility for any damage or neglect that may result from my student using a Fort Payne City Schools' digital device, which may result in monetary charges.
- I understand that my student may lose his/her digital device privileges and/or incur financial fees as a result of inappropriate behavior, damage, neglect or loss of the Fort Payne City Schools' digital device.

Parent/Guardian – Print your name here: _____

Parent/Guardian – Sign and date here: _____, **date:** _____

Current Address: _____

Phone Number: _____

Student Acceptable Use Policy for Internet/Network Services

I have read the Student Acceptable Use Policy for Internet/Network Services and agree to abide by the provisions contained within the document. I understand that I can be disciplined if I violate the Student Acceptable Use Policy for Internet/Network Services. Such discipline may consist of the revocation of Internet/network access up to and including suspension, expulsion and/or legal action based on the seriousness of the violation.

Name (Print) _____

Signature _____

School _____ Signature of Parent/Guardian _____

Date _____

Internet/Email Usage _____ Yes _____ No

****By choosing No your child will be excluded from Internet/Email resources even if these activities are an integral part of the educational activities being pursued at the school.***

*****Please detach this page after signing and have the student return it to the homeroom teacher***

COPPA and Online Resources Agreement

The Children's Online Privacy Protection Act (COPPA) requires websites to gain parent permission for users under the age of 13 and/or 18 before creating individual online accounts. Many educational sites used by Fort Payne City Schools require student accounts and, thus, parental permission. To view the the "FPCS Approved Online Tools and Resources" list, go to the **Parent Information Section** on the District website.

I give permission for the school system to upload the basic directory information of my child in order to create an account on these educational websites.

_____ Yes _____ No

Student's Name (print) _____ Parent/Guardian Signature _____

Date _____

Video Conferencing Call Permissions

I give permission for my child to participate in group (class/school) video conference calls while in class/school during the 2019-2020 school year. I understand that this is for instructional purposes only, and that my child's teacher or school administrator will be leading the session. Students will be visible to other participants in the video call. Students will be able to ask/answer questions during the video call.

_____ Yes _____ No

Student's Name (print) _____ Parent/Guardian Signature _____

Date _____

Student Information Form
(Complete and return to your child's school)

Social Security Number (voluntary):	Teacher:
Last Name:	Date of Birth: Place of Birth:
First Name:	Sex: Male Female
Middle Name:	Race: American Indian/Alaska Native Asian Black Native Hawaiian/Pacific Islander White
Name child goes by:	Bus Number:
Mailing Address:	Child will ride bus to this address:
City State Zip	
Physical 911 Address:	Car Rider? Yes No
City State Zip	Go to Extended Day? Yes No
Home Phone Number:	Name & age of siblings:
Name of person(s) child lives with: Relation to child:	
Parent/Legal Guardian I	Parent/Legal Guardian II
Name	Name
Address: (if different than above)	Address: (if different than above)
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
E-mail:	E-mail:
Relation to child:	Relation to child:
Employer: Shift:	Employer: Shift:
Employer Phone Number:	Employer Phone Number:
Emergency Contacts (if parent cannot be located)	
Name Phone #:	Allowed to pick up child? Yes No
Relation to child: (circle one) Grandparent Relative(aunt/uncle/cousin) Step-Parent Other	
Name Phone #:	Allowed to pick up child? Yes No
Relation to child: (circle one) Grandparent Relative(aunt/uncle/cousin) Step-Parent Other	
Name Phone #:	Allowed to pick up child? Yes No
Relation to child: (circle one) Grandparent Relative(aunt/uncle/cousin) Step-Parent Other	
Name Phone #:	Allowed to pick up child? Yes No
Relation to child: (circle one) Grandparent Relative(aunt/uncle/cousin) Step-Parent Other	
Medical Conditions:	Does your child take a daily prescribed medication? If yes, name of medicine:
Allergies:	

School Responsibilities:

Fort Payne High School will:

- 1. Provide high-quality curriculum and instruction in a supportive and effective learning environment that enables the participating children to meet the state's student academic achievement standards as follows:**
 - Follow the Alabama Course of Study accordingly with all content standards.
 - Daily Math and Reading Intervention
 - School-Wide Advisory Program
 - Provide additional support in the classroom through Title 1 Instructional Coach
 - One-on-one technology initiative
- 2. Hold parent-teacher conferences during which this compact will be discussed as it relates to the individual child's achievement:**
 - Parent Orientation
 - Parent Involvement/Title 1 Program Meeting
 - Fall and Spring Parent/Teacher Conference/ Involvement Days
 - Conferences scheduled throughout the year as requested by parent and/or teacher.
- 3. Provide parents with frequent reports on their child's progress:**
 - Learning Management Systems (LMS): Remind and Blackboard communication systems for student/parent/teacher
 - Information NOW Software (INOW) includes current grades, discipline, and attendance.
 - Blackboard Mobile Communication APP to access all pertinent information regarding your child such as grades, notifications, lunch information, and transportation
- 4. Provide parents reasonable access to staff:**
 - Fort Payne High School Website/ Email exchange
 - Phone calls- Interpreters available
 - School conferences that are scheduled by appointment
 - Parental Engagement/Title 1 Meetings
 - Communicate with staff through LMS
- 5. Provide parents opportunities to volunteer and participate in their child's class and to observe classroom activities as follows:**
 - Volunteer to assist with special events and activities such as: PTA, chaperoning field trips and special school/classroom events
- 6. Ensure regular two-way, meaningful communication between family members and school staff and, to the extent practicable, in a language that family members can understand.**
 - Interpret communication in native languages and provide translators at each school

Parent Responsibilities:

We, as parents, will support our child's learning in the following ways:

- Ensure good attendance including minimal to zero tardies and check-outs
- Provide positive reinforcement for academic achievement
- Ensure that homework is complete
- Monitoring the amount of time my child is involved in television viewing, social media usage, cell phone usage, computer usage, and electronic games
- Participate and attend parent meetings, parent-teacher conferences, and school sponsored events
- Check LMS site to monitor my child's progress, stay informed, and communicate with staff
- Promptly read all notices and communications from the school or school district
- Serve to the extent possible as a parent leader, School Advisory Council member, Federal Programs Advisory committee member, and any other school advisory or policy group

Student Responsibilities:

I, as a student, will share the responsibility to improve my academic achievement and achieve the state's high standards. Specifically, I will:

- Read twenty to thirty minutes daily outside of school
- Behave in a manner that exhibits good citizenship and character
- Take responsibility for completing all classroom and homework assignments
- Give my parents all notices and communications from school each day
- Attend school regularly and promptly
- Check email daily

**SCHOOL-PARENT
COMPACT**

Fort Payne High School, and the parents of the students participating in activities, services, and programs funded by Title I, Part A of the Every Student Succeeds Act of 2015 (ESSA), agree that this compact outlines how the parents, the entire school staff, and the students will share the responsibility for improved student academic achievement and the means by which the school and parents will build and develop a partnership that will help children achieve the state's high standards.

Principal Signature & Date

Parent Signature & Date

Student Signature & Date