



## Parental Permission for Participation in Online Learning

**My child** \_\_\_\_\_ has my permission to take the following \_\_\_\_\_ District Online course. I understand that this is an alternative instructional delivery method that involves self-motivation and personal responsibility on my child's part. I agree to fulfill and to take responsibility for my child when the course requires either online or offsite learning experiences which are held outside of the regular school day (as specified in the course description). I further acknowledge that both my child and I understand and will fulfill the obligations of the local school district's Internet/Technology Acceptable Use Policies.

**As the parent/legal guardian of this student,** I understand and give permission for the School District and to save and share information about my child. This information will be shared with the school or company who is providing the course for registration, course progress, course completion, and grading purposes and may include demographic information such as age, race, and home contact information; upon completion of the course, the school district will receive copies of the information for my child's student record and transcripts. Additional information may be collected for reporting to funding agencies. Such information will not include the student's name and other personally identifiable information or home contact information, but may include family income level, race, or whether the student is gifted or talented or receives district services such as special education or ESL programming. I further understand that researchers such as those working with the University of Wisconsin, Wisconsin's Department of Public Instruction or the United States Department of Education may be studying this program, and that non-distinguishing information may be shared for these purposes.

### Course Information:

*Local Facilitator:*

*Attach a printout of the course description from the DDO or Vendor's Course Catalog.*

### Other Important Information regarding this course:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent  Legal guardian  I am a student of legal age (18 years or older)

Return signed form to your child's teacher. **Local Mentor:** place the copy in your child's district/school folder.

**Note:** This document is valid only for the course listing provided. Each course is delivered as an independent instructional experience and requires independent parental approval.