

The Greater Victoria School District No. 61 Personal Information Consent Form 2018/2019

For parents*: Please complete, sign and return to your school.

Stuc	lent's Name: (Last) (First) (First)
Scho	pol:
Coll	ection, use, and sharing of student personal information
dire	pols and Districts are authorized to collect, use and share student personal information that is ctly related to and necessary for their educational functions. For other school or education-related poses, parental or student consent is required.
of Sophor Dist achi	ccordance with the BC Freedom of Information and Protection of Privacy Act, the Board of Education chool District No. 61, Greater Victoria, is seeking your consent to collect, keep, use and share tographs, videos, images, and/or names of students in a variety of publications and on the school or rict's website(s) for education-related purposes, such as recognizing and encouraging student evement, building the school community and informing others about school and District programs activities.
For	example, student names, and/or images may be used or shared in:
	 school and District communications, such as newsletters, news releases, brochures, and reports in limited or public circulation;
	 school and District websites, social media sites (e.g. Facebook), and online video (e.g. YouTube), with limited or public access;
	 videos, CDs, and DVDs designed for educational use only.
Ple	ease check A <u>OR</u> B <i>(not both</i>)
	I GIVE MY CONSENT for the school or District to collect, use, and share my child's name and/or image for purposes consistent with the above. I understand that images and information posted on the internet may be stored and accessed outside of Canada.
	This consent may be withdrawn at any time in writing but withdrawal of consent does not require the school or District to take any steps to withdraw from publication any previously published material. Unless withdrawn, this consent is effective immediately and lasts <u>until September 30</u> of the next school year (2019).
В.	I DO NOT CONSENT to the use and disclosure of my child's name and/or image for the above purposes for this school year.

*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.

Date:			
Parent's Name: (Last)	(please print) (First)		
	(pieuse print)		
Parent/Guardian* Signature:			
Parent/Guardian Contact Information (for contacts related to this notice)			
Telephone No.:	Email:		
*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.			
If you have any questions about this	consent or about the collection of student personal information,		

This form is effective for the 2018/2019 school year up to and including September 30, 2019

you may contact the school principal or the Superintendent's Office.