

## Students

### Exhibit - Biometric Information Collection Authorization

*If the District collects biometric information, distribute to parent/guardian at the time he/she/they register(s) a child for school and distribute to students upon turning 18. Return to the Building Principal to be kept in the student's temporary record.*

**Student** \_\_\_\_\_ **Anticipated Graduation Year** \_\_\_\_\_

The District collects biometric information from its students only for identification and/or fraud prevention purposes. Biometric information includes any information collected through an identification process for individuals based on their unique behavioral or physiological characteristics, including fingerprint, hand geometry, voice, or facial recognition, or iris or retinal scans. The School Code requires written permission from the individual who has legal custody of the student, or from the student if he or she has reached the age of 18, before the District may collect biometric information from students.

When collecting biometric information, the School Code also requires the District to:

1. Store, transmit, and protect all biometric information from disclosure.
2. Prohibit the sale, lease, or other disclosure of biometric information to another person or entity unless: (a) prior written permission by you is granted, or (b) the disclosure is required by court order.
3. Discontinue the use of a student's biometric information under either of the following conditions: (a) upon the student's graduation or withdrawal from the school district; or (b) upon receipt in writing of a request for discontinuation by the individual having legal custody of the student or by the student if he or she has reached the age of 18.
4. Destroy all of a student's biometric information within 30 days after the occurrence of either conditions 3(a) or 3(b) above.

**I consent to the collection of biometric information of the above-named student by the School District solely for identification or fraud prevention. I understand that this authorization is valid until he/she/they graduate(s) or withdraw(s) from the District, I request that the District's use of his/her/their biometric information be discontinued at that time or when he/she/they reach(es) the age of 18, whichever is earlier. I understand that a request for discontinuation of the use of the above-named student's biometric information may be made at any time by notifying the Building Principal in writing.**

\_\_\_\_\_  
Parent/Guardian (if student is under age 18) Signature

\_\_\_\_\_  
Student (if age 18 or over) Signature

\_\_\_\_\_  
Date

