

Valley Center Public Schools

**Electronic Web Access Agreement for Viewing Student Information
Via Valley Center Public Schools infinite Campus Parent/Student Portal**

Parent Agreement

I am requesting to review my child(ren's) student information on the Valley Center Public Schools Internet website. I have read the Valley Center Public Schools User Expectations and Computer Requirements for the Infinite Campus Parent/Student Portal and agree to abide by and support the expectations. I understand, for the interest of security, the District reserves the right to change user passwords or deny access at any time. By signing this agreement I, as parent/guardian, release the Valley Center Public Schools from any and all liability for damages arising out of the unauthorized access to my parent/guardian account.

I agree that I will not share my password or allow anyone other than myself to use the account including my own child(ren).

I agree to protect any information printed or transferred to my computer, or destroy the documentation generated from this site.

I understand that three unsuccessful logins will disable my account. If my account becomes locked, I will contact my child's school and request the account to be unlocked. I will provide the "Personal Login ID" given to me at the time the account was created and answer any questions to verify my identity. In the sole discretion of the District, the account may be unlocked, but I understand that it may take up to 3-5 school days to have my account unlocked.

I have checked that the computer I will be using to access the Internet site for viewing student information meets or exceeds the minimum requirements as identified on the Valley Center Public Schools website.

List the names of all your child(ren) currently enrolled in Valley Center Public Schools and residing at the address listed below. The information given on this form must match the enrollment information you provided during registration.

Residence Address: _____

Email Address: _____

Home Telephone Number: _____ () _____

Please Print

Child's Legal First and Last Name must be written as they appear on the birth verification.

Child's Legal First Name	Child's Legal Last Name	Child's Date of Birth	School	VC Student ID# (completed by school)

The school will keep the completed and signed form in the cumulative record folder of each student.

Parent/Guardian Signature

Date

Parent/Guardian Name (Print)

The school principal or secretary must witness the parent signing this form. **The parent must provide a photo ID prior to signing.**

If the parent cannot visit the school, a notary public must witness the parent signing the form and use their public seal with a current date.

School Witness or Notary Public Official Witnessing Parent/Guardian Signature

Date

Date Commission Expires

