



**Parent/Person in Parental
Relation/Student Consent
and Acknowledgment**



Name of Student _____ Current School Year 20 - 20

Home Address _____ Emergency No. () - _____

_____ Sending District _____

Center _____ Class _____

Home Telephone No. () - _____ Instructor _____

Home School _____

ESBOCES Class _____

- This form verifies that you have been provided with information on ESBOCES policies and procedures regarding student safety and instruction.
- Please respond to all statements and sign to give your consent for each area.
- This form provides consent for use of student photographic, audio, or video footage.

Students are to obey all safety rules, including eye safety, and rules pertaining to career areas.
Students are to obey all bus rules.
Students are to obey all driving rules.

Please check one box each for items 1 and 2.

- My child may operate shop equipment after receiving instruction and permission from the teacher.
 My child may not operate shop equipment.
- I give consent for photographic, audio, and video footage of my child to be obtained and utilized in both print and electronic media, including, but not limited to, newsletters, bulletin board displays, the ESBOCES website, and ESBOCES social media sites, as well as any and all media used for educational student and staff training and related purposes, and to inform the public via news media outlets. This consent will remain valid for all perpetuity unless ESBOCES receives written instructions advising otherwise from the parent/person in parental relation or student 18 years of age or older.
 I do not give consent.

The parent/person in parental relation signature below affirms the responses to items 1 and 2 above and acknowledges that he/she has read and understands the ESBOCES Code of Conduct and understands that it supports and promotes a safe learning environment AND has reviewed the ESBOCES Student Handbook with his/her child and understands that the Board policies and building procedures outlined were established to provide a safe learning environment.

Signature of Parent/Person in Parental Relation

_____/_____/20
Date

Signature of Student

_____/_____/20
Date