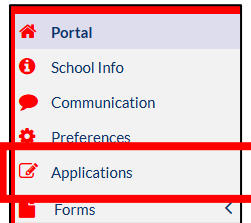


Policy 4900 allows for the activation and installation of audio-visual cameras in self-contained ESE classrooms when 100% of students have provided written consent under the Parents' Bill of Rights.

Audio-visual recording will only apply to self-contained ESE classrooms. If your child's classroom meets the criteria *and* 100% of students have provided written consent, an audio-visual camera will be installed and activated. Once this occurs, you will receive a notification letter from your child's school.

From the Parent Portal, select **Applications**.



Find the application for **Policy 4900** Consent and select **Start**.

Available Applications			
The district has made the following applications available for you to complete as needed.			
Application	School Year	Status	View/Edit
Policy 4900 Consent	All Years	Not Started	Start

Enter the required fields and click **Save**.

Policy 4900 Consent Converted Copy

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Policy 4900 Parent Consent Form

Policy 4900 allows for Audio and Video Recording in self-contained ESE classrooms to promote the health and safety of students in a self-contained Exceptional Student Education Classroom.

Florida Statute 1014, the Parents' Bill of Rights, requires The School Board to obtain parental consent before audio and video recording of self-contained ESE Classrooms can occur. This consent will be requested annually.

The School Board of Broward County will maintain the recording for 30 days. The school principal is the custodian of the footage. Footage is available for up to 30 days if a principal needs to investigate an alleged incident in the classroom, and parents may also request to view footage of an alleged incident.

By signing below, I consent to the audio and video recording of my child, _____, in his/her self-contained classroom for the 2025-2026 school year.

I understand I may revoke my consent at any time during the year by requesting and completing a new **Policy 4900 Parent Consent Form** from the school principal and/or their designee.

* Policy 4900 Consent for Audio and Video Recording

I WILL Opt in

* Policy 4900 Parent Signature

Click to Sign

* Policy 4900 Date Signed

Policy 4900 Date Signed

Policy 4900 Parent Signature

Click **Submit**.

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Click **Confirm** or if more changes are needed select **Review/Make Changes**.

Thank you for submitting Policy 4900 Consent Converted Copy

Confirm

Review/Make Changes