

Policy 4900 Parent Consent Form

Student Name _____ ID Number _____

School _____ Grade _____

Policy 4900 allows for audio and video recording in self-contained Exceptional Student Education (ESE) classrooms to promote the safety and well-being of students.

[Florida Statute 1014, 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. Information regarding the policy can be accessed ([Policy 4900 Website](#)). If you have questions about Policy 4900 and the request for written consent, you can direct them to your student's school or contact the District ESE Department at 754-321-3400.

By selecting YES below, I consent to the audio and video recording of my child in his/her self-contained classroom for the 2026-2027 school year.

- ☐ Yes, I consent to audio and video recording of my student's self-contained classroom.
- ☐ No, I do not consent to audio and video recording of my student's self-contained classroom.

By declining consent, my student's classroom will not be protected by a camera.

I understand I may change 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.

Parent's Name: _____

Parent's Signature

Date