



Princess Elizabeth Public School
247 Thompson Rd
London, ON N5Z2Z3
519 4528490

School Year

2018 2019

Parent/Guardian Consent for the Use of Student Personal Information - Elementary (Custodial Parent/Guardian)

The *Routine Use and Disclosure of Student Personal Information* guideline is provided on the Thames Valley District School Board website (www.tvdsb.ca/parents). The guideline outlines how your child's personal information is routinely used for an educational or consistent purpose in accordance with the Education Act and the Municipal Freedom of Information and Protection of Privacy Act.

In addition to the practices outlined in the guideline, we like to recognize and share good news stories both within the school and in our community. From time to time, school and/or classroom activities such as student projects, achievements, activities, plays, athletics and presentations are photographed or recorded by the school or board staff. Sharing these photographs and recordings is a wonderful way to celebrate and remember these activities and to showcase our good news stories in the community. Your permission to publish your child's photographs or recordings and/or their full name as a way of sharing good news stories in the community is requested below.

 Student Name

Publication of Student Names and Photos

I give permission as follows:

- Yes No Post identifiable photographs or recordings of your child and/or their full name on school/Board websites, newsletters and/or social media sites (including Twitter, Facebook, YouTube, and Flickr) as a way of sharing positive and good news stories with the community.
- Yes No Allow the media to interview or capture identifiable photos or recordings of your child for the purpose of reporting good news stories and school activities.

Class/Student Lists

From time to time, community organizations request class/student lists to conduct various activities with our students.

The following is a list of organizations we anticipate will request class/student lists this year. Your permission is sought to include your child's name on the class/student list for the organization. Should additional organizations request this information throughout the year, your further approval will be sought at that time.

I give my permission for my child's name/my name (students 18 and older) to be included on the class/student list if requested by the following organizations.

Yes No Home & School

Dental Screening

- Yes No I give permission for my child to participate in the dental screening that may be provided by the local health unit. I understand that I will be given notice of when the screening will occur.

Authorization and Consent

Parent/Guardian: (Print Name)

Signature:

Date (YY/MM/DD):

I confirm that I am the student's parent/guardian. I understand that I may amend my approval at any time.

Notice of Collection: The personal information provided on this form and any other correspondence relating to involvement in Board programs is collected by the Thames Valley District School Board under the authority of the Education Act and Regulations (R.S.O. 1990 c. E.2) as amended. The information will be used to register the student in a school, for the collection of applicable student/activity fees, as well as for any consistent purpose. Information is shared with employees such that they may carry out their job duties. In addition the information may be used or disclosed to comply with legislation, for compelling circumstances affecting health and safety or discipline, as required in circumstances related to law enforcement matters, or in accordance with any other Act. For questions about this collection, contact the Board's Freedom of Information Co-ordinator, Thames Valley District School Board, 1250 Dundas Street, London, Ontario, N6A 5L1, Telephone 519-452-2000 ext. 20218.

Retention C+1

Revised May 2014