



Dear Parent/Guardian,

This form must be filled out when a change is made to your student's media permissions. Please complete and return to your school's front office. If you have any questions, please reach out to your student's Building Principal.

**Publishing Student Information:**

Throughout the school year, photographs and video recordings of students may be taken by school staff members, District staff members, other students, or other individuals authorized by the Building Principal. With the consent of parent/guardians, the District or school may use these named or unnamed photographs/recordings in various District or school publications, including newsletters, learning management system, presentations, school websites and news releases acknowledging students who participate in a school activity or deserve special recognition.

In order for the District or school to publish a photograph/recording of a student, whether identified by name or unnamed, one of the student's parents or guardians must indicate such consent.

I have read the Publishing Student Information and agree that by selecting my choice below, I grant or do not grant consent to ORCSD and the school to use named or unnamed photographs of my child in any distributed District or school publications including newsletters, presentations, school newspapers, websites, and news releases. I understand this choice is valid for the current school year only and I may revoke this permission at any time by completing this form and submitting to the School Office.

**Please select your changes below:**

I authorize SAU 5 to use named student work, photographs, and video of my child in various distributed ORCSD or school digital or print publications, including newsletters, Schoology presentations, school newspapers, websites, and social media.

- Yes
- No

I authorize SAU 5 to use unnamed student work, photographs, and video of my child in various distributed ORCSD or school digital or print publications, including newsletters, Schoology presentations, school newspapers, websites, and social media.

- Yes
- No

**MEDIA (Newspapers, Television, Website)**

I grant permission for my child to be interviewed, photographed, or videotaped for use in school/district publications, school district productions, or for use by the general news media for print or broadcast purposes and for his/her name to be published in school/district publications, website, social media, and in news publications and broadcasts.

- Yes
- No

**Directory**

I grant permission for my child’s name, phone, email, and/or any other contact information, to be published in the school/classroom directory published and distributed to families by the PTO if applicable at your child’s school.

- Yes
- No

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Office Use Only:

Date Received: \_\_\_\_\_

Updated in Powerschool: \_\_\_\_\_