



School _____

Exhibit A

Student Permission to Use the Internet

Consent

Student Name _____

Student's Consent if over 18 years of age

Student's Address: _____

Date: _____ student's signature

student's printed name

Guardian's Consent if student is under 18 years of age

I am the parent or the legal guardian of the above-named minor and hereby consent to the use of the Internet and network services.

I affirm that I have the legal right to issue such consent.

Parent/Guardian's Address: _____

Date: _____ parent/guardian's signature

parent/guardian's printed name

Board of Education of Pickens County



School _____

Exhibit B

Student Permission to Publish

Consent

Student Name _____

(Place a check mark in the box or boxes for which you are granting permission.)

I do hereby give Pickens County Schools the right to use my

first name photograph published project

for reproduction in any manner other than school directory, including the Internet. This material will only be used for activities related to the Pickens County Schools' web site.

Student's Address: _____

Date: _____ student's signature

student's printed name

Guardian's Consent if student is under 18 years of age

I am the parent or the legal guardian of the above-named minor and hereby approve the foregoing and consent to the use of photograph, name, and published project to the pursuant terms mentioned above.

I affirm that I have the legal right to issue such consent.

Parent/Guardian's Address: _____

Date: _____ parent/guardian's signature

parent/guardian's printed name

Board of Education of Pickens County