The Greater Victoria School District No. 61



Notice to Parents and Students: Outside Media in Schools Consent 2017/2018

For parents*: Please complete, sign and return to your school.

Student's Name: (Last) ______ (First) ______

(please print)

School:

Media (including radio, television, newspapers, and other print and online media) are sometimes permitted or invited to come to the school or to school activities and allowed to take photos or video or conduct interviews with students, for the purpose of promoting public understanding of school programs, building public support for public education, and encouraging student achievement.

Note that school and district staff cannot control news media access, photos/videos taken by the media or others in public locations (such as field trips or off school grounds) or school events open to the public, such as sports events, student performances, school board meetings, etc.

For Parents: I acknowledge receipt of this Notice and hereby give my consent. If I have questions, I will contact the School District Superintendent's Office.				
Date:				
Parent's Name: (Last)	(First) (please print)			
Parent/Guardian* Signature:				
*For parents who have court orders describing their parental rig student's privacy protection rights.	ights, this form should be signed by the parent who has the right to exercise the			

If you do not want your child to be involved in such activities, you need to:

- Tell your child to avoid these situations
- Tell your child's teacher of your wishes
- Complete and return the following form to ask the school and school district to take reasonable steps to avoid this type of publication of your child's name, image or personal information by outside media.

NOTE: The following is to be completed <u>only</u> if you wish to register an objection to publication of your child's personal information by outside media at school events.

I DO NOT WANT my child's image or name being published by outside media. I have told my child's teacher of my wishes.

I REQUEST that the school district and its staff take all reasonable steps to avoid having my child's image or name collected or published by outside media when they are present in school or at school activities at the invitation of the school or school district.

I CONSENT to disclosure by the school district or its staff of the personal information that is necessary to give effect to this request.

I MAY choose to override this notice by giving my consent in a specific circumstance. This request applies during the current school year unless I expressly revoke it.

Date:	Parent's Name: (Last)		(First)	
		(please print)		
Parent/Guardian* Signature: _				
Parent/Guardian Contact Infor	mation (for contacts related	to this notice)		
Telephone No.:	Email:			
•	5 ,	ts, this form should be sig	ned by the parent who has the right to exc	ercise the
student's privacy protection rights				

If you have questions about this notice or about the collection of student personal information, you may contact the school principal or the Superintendent's Office.