

CANTON CITY SCHOOL DISTRICT

Internet Permission Not Granted

This form is to be signed and returned to the school ONLY if the parent/guardian does NOT want the child to have an Internet account at school.



Student Name: _____ Grade _____

School: _____

Date: ____/____/____

Parent/Guardian: (required if the student is under the age of 18)

As the Parent or Guardian of the above student, I have read the Terms and Conditions for use of the Internet and have determined at this point that my child is NOT to be given an Internet account/access at school.

PRINTED Parent/Guardian Name: _____

Address: _____

Phone: _____

SIGNATURE _____ Date: ____/____/____