**Approval of Use of the Internet**

My child,\_\_\_\_\_\_\_\_\_ has *I* does not have permission to use the

Internet for educational purposes. Parent

Signature

I agree to abide by the Internet policy.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Signature

**USE OF STUDENTS FOR PUBLIC INFORMATION PROGRAMS (STUDENT PHOTOGRAPH AND VIDEO POLICY)**

It is the policy of the Richmond County Board of Education to allow reasonable

access to students for the purpose of using and/or producing photographs, videos, movies, recordings, likenesses, and/or the voice of any student for the internal and external promotional and information activities of the Richmond County School System so long as such activities are legal, including the protection afforded by the Family Education Rights

to Privacy Act (FERPA) any/and privacy rights granted under general legal protections.

As used in this policy, the term "photograph(s)" shall include, but not be limited

to, photographs, videos, movies, recordings, likenesses and/or the voice of any student. This policy is subject to the following conditions:

1. The Superintendent, or his designee, shall inform schools at the beginning of each

year that it is acceptable and desirable for each school to obtain prior permission from students and parents to allow news media to use photographs of students. The Superintendent or his designee shall have the right to refuse any such referral for photograph or other internal or external promotional or informational activity

publicity where such action in a particular case would be in the best interest of the

school system. The Board will be informed upon any such occasion.

2. If the student is under 18 years of age, the parent or guardian of the student must consent in advance in writing by executing the Photo and Video Release Form approved by the Board.

3. The School System will use its best efforts to have the Photo and Video Release

Form executed upon the registration of each child into the School System each year.

4. This Photo and Video Release Form shall be on file in the appropriate school and be referenced upon request to confirm if such student has permission for photographs or other promotional or instructional activities

5. It is understood that when employees and students attend meetings that are under the Open Meetings Act that the media can take photographs and the likenesses that might personally identify the parent or student notwithstanding this policy. Examples are School Board meetings and School Council meetings.

6. The Photo and Video Release Form to be used shall be the one attached hereto

and made a part hereof. The Superintendent has authority to modify the release if circumstances warrant it. However, the Board will be promptly informed of

the change.

7. The photographs, video, movie, recording, likeness and or voice of the student

obtained in accordance with this policy may be used by the media without any

restrictions.

8. Students from Abuse Shelters, students classified as homeless under the McKinney-Vento Homeless Assistance Act who attend Richmond County schools or special needs students will not be included automatically under this policy. The identity of these students will be protected unless the guardian and shelter official agree at the time, not in advance, for photographs to be taken.

**PHOTO AND VIDEO RELEASE FORM**

I do hereby grant Richmond County Schools the unlimited right to use and/or

produce photographs, videos, movies, recordings, likenesses and/or the voice of any student in any legal manner and for the internal and external promotional and informational activities of Richmond County Schools. I also agree to allow my child's work and/or photograph to be published on the Richmond County School Internet web site, and RCBOE publications. I further understand that my signing this release, I waive

any and all present or future compensation rights to the use of the above stated materials. School Name:

Student's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Homeroom Teacher: \_ Parent/Guardian Signature: Date: \_

Parent/Guardian Name (Please Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_