Consolidated Acknowledgement Form 2022-2023

Technology Acceptable Use Policy

I, as the parent/guardian of this student, have read and understand the terms of the AUP and have reviewed these terms with my student. I understand that student access to educational technology is a privilege which is conditioned upon the student's adherence to the AUP. I further understand that although the School District prohibits inappropriate use of technology, it is impossible to restrict all access to inappropriate materials which may be available on the internet or through other electronic communications. Accordingly, I will not hold the School District or its employees responsible for materials which may be acquired through the School District's Network.

We both acknowledge, in accordance with Public Acts 342 and 343 of 2012, that we both understand and agree with the statements and assurances as listed.

Parent Electronic Signature:
Date:

Concussion Awareness

On July 1, 2013 Public Acts 342 and 343 became law in the State of Michigan. These concussion laws require all levels of schools and youth sports organizations to educate and train staff, notify parents of the law, and monitor all possible youth concussions or head injuries. Concussion Fact Sheet

I, as the parent/guardian of this student, have read the fact sheet for parents on concussion, have reviewed with my child, and we know what to do if they have a concussion or other serious brain injury.

Parent Electronic Signature:
Date:

Student/Parent Handbook-Student Code of Conduct

I, as the parent/guardian of this student, have read and understand the terms included in the Student/Parent Handbook-Student Code of Conduct and have reviewed these terms with my student. I understand that all provisions expressed in the Student/Parent Handbook-Student Code of Conduct apply to all students regardless of age while they are enrolled at Holly Area Schools and that these provisions are in effect on all school property and vehicles and at all school related activities. In addition, I understand that due to related governmental requirements, that information contained in this document will be updated as need and parents will be notified of these changes.

Parent Electronic Signature:
Date:

Virtual Learning Acknowledgement

I, as the parent/guardian, consent to allow Holly Area Schools to offer my student, , virtual courses whether by my choice for virtual online learning, school closures or other unforeseen circumstances.

Parent Electronic Signature:
Date: