

Highlands Intermediate School 2024 Summer School Application

Last Name: _____ First Name: _____ MI: _____

Full Address: _____

Current School Attending: _____ **Current** Grade (23-24 SY): 6 7 8

Father/Guardian's Name: _____ Cell/Contact # _____

Email Address: _____

Mother/Guardian's Name: _____ Cell/Contact # _____

Email Address: _____

In case the student becomes ill or injured and the parent/guardian cannot be contacted, school officials have the parent(s)/guardian(s) permission to contact and release student to the custody of any of the emergency contacts listed below:

Contact 1: _____ Ph# _____ Relationship: _____

Contact 2: _____ Ph# _____ Relationship: _____

Medical Condition/Problem: _____

Prescribed Medication for Condition: _____

Physician's Name: _____ Ph# _____

List your choices of classes below in order of preference:

Period 1 or 2

1st Choice: _____

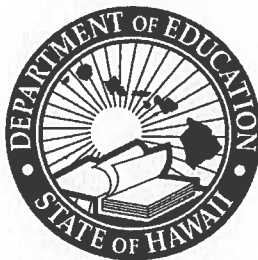
2nd Choice: _____

3rd Choice: _____

By completing and signing this form, I agree to the following:

- 1. My child and I will abide by the terms explained on the summer program information sheet and acknowledge the receipt of the Hawaii Administrative Rules Title 8 Chapter 19 and Summer School memo/guidelines.**
- 2. I give consent to school officials to take appropriate action for the safety and welfare of the student named on this form.**
- 3. I understand that to finalize my registration, I must submit 4 forms: Summer School Application, Technology Responsible Use, Student Publication/Audio/Video Release and School Closing.**

Parent/Guardian Signature: _____ Date: _____



Technology Responsible Use Form

(for digital devices, network, and internet services owned and leased by the Hawaii State Department of Education for its students)

Each student and his or her parent(s)/guardian(s) ("parent" or "parents") must review the *Technology Responsible Use Guidelines for digital devices, network, and internet services owned or leased by the Hawaii State Department of Education for its students*, known as "Technology Responsible Use Guidelines" or "TRUG", and sign this "Technology Responsible Use Form" or "TRUF" for access to digital devices, internet and network services, including online educational services.

STUDENTS who will be using Hawaii State Department of Education (HIDOE) owned or leased digital devices, network, and internet services:

- I have read the Technology Responsible Use Guidelines (RS 17-0051) in the separate document and agree to, and will abide by, its terms/guidelines stated therein, and as may be subsequently modified.

As a PARENT, I also agree that:

- I am responsible for monitoring my child's use of HIDOE-owned or leased digital devices outside of HIDOE property/school.
- HIDOE may bar access by students to certain material not deemed for educational purposes; however, I also understand it is impossible for HIDOE to restrict access to all controversial and inappropriate materials. Therefore, I will hold harmless HIDOE and its employees from any cause of action related to my child obtaining access to materials or software which may be deemed inappropriate.
- I have discussed the TRUG with my child and, therefore:
 - If available at the school, I agree that my child be assigned a HIDOE-owned or leased digital device;
 - I agree that my child be allowed access to HIDOE's internet/network services; and
 - I agree that my child be allowed access to the online educational services provided by the school.
- I understand that all software loaded on the device upon issuance to the assigned student is the property of the HIDOE. Copying this software to another device is not permitted and may violate copyright laws. Students/parents should not download or install any software on this device other than printer drivers for home printing or software specifically for access to a home network.
- By signing below, I, in consideration of HIDOE providing my child with HIDOE network and Internet access, agree to indemnify HIDOE for any losses, costs, or damages (including reasonable attorney fees) incurred by HIDOE relating to, or arising out of, any breach of these or other HIDOE rules by the student in using HIDOE-owned or leased digital devices, Network, and Internet. I shall assume responsibility for any damages to HIDOE-owned or leased digital devices while the student is using it, including paying for repairs.
- HIDOE assumes no responsibility for any unauthorized charges or fees, including telephone charges, long-distance charges, per-minute surcharges, and/or equipment on-line costs. Ordinary internet and network access and use will incur no such charges. Any such charges are the responsibility of the parent signing below.

This TRUF is valid for the student while attending Highlands Intermediate, unless rescinded by the parent or the TRUG has been revised.
(school name)

Student signature also needed



Student Signature	Printed Name & Student ID#	Date
Parent/Guardian Signature	Printed Name	Date
Parent/Guardian Signature	Printed Name	Date



State of Hawaii
Department of Education

Student Publication/Audio/Video
Release Form-General

This form supersedes all previous Student Permission to Videotape/Record, Reproduce Work and Student Publication/Audio Release Forms.

Note: This form does not apply to the creation or use of digital or print media of students for research purposes, including post-secondary degree requirements. For more information visit: <http://bit.ly/HIDOERESEARCH> or <http://www.hawaiipublicschools.org/VisionForSuccess/SchoolDataAndReports/HawaiiEdData/Pages/Data-Requests.aspx>

In order to protect students' rights to privacy as outlined in the Family Educational Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA), parents/guardians or eligible students (those aged 18 or over) are being asked to give the Hawaii State Department of Education (HIDOE) permission to create and/or use digital/electronic or print media of students' name, voice, likeness or images of student work for the purposes described in this form.

I hereby give my permission to HIDOE to create or use the media described above of my child (if parent/guardian)/me (if eligible student) or my child's/my work- video and audio recordings, photographs, and images - for the following educational purposes:

- Publication on HIDOE's websites, social media accounts, or other digital/electronic media, or in print
- HIDOE staff professional development, including peer and advisory observations
- Training within HIDOE schools related to preparation programs
- Participation in distance learning lessons or school activities

I understand that the distribution of these media may include print, online, or digital/electronic media and open-circuit broadcast, closed-circuit, or cable television transmission within or outside of the State of Hawaii.

I understand that there will be no compensation, financial or otherwise, by HIDOE for its use of these media, either for initial or subsequent transmission or playback.

I understand that granting permission includes a potential risk of loss of privacy. I hereby release HIDOE from any liability resulting from or connected with the creation or use of these media. I understand that permission is granted for the life of the media. I release all interest in the media for which I am giving permission.

I understand that I may withdraw my permission at any time without any negative consequences by submitting a written statement to my child's/my school. I understand that withdrawing consent will not affect my child's/my standing in school, nor any publication or work using these media which has already been produced.

→ Please check one

Yes No HIDOE has my permission to create or use digital or print media of my child's/my name, voice, likeness or images of my child's/my work exclusively for the non-commercial, educational purposes stated above.

This form is valid for the student while attending the below-listed school, unless rescinded by the parent or eligible student, the student exits the below-listed school, or revision of the Student Publication/Audio/Video Release Form (RS 21-0480). By signing this form, I agree to the terms and conditions stated in this form, unless I check the "no" box.

Student's Name (Please Print)
HIGHLANDS INTERMEDIATE SCHOOL
School

Parent/Guardian/Eligible Student Name (Please Print)

Signature

Home Address

City, State, Zip Code

Date

Student Publication/Audio/Video Release-General (RS 21-0480)

By providing Hawaii Department of Education (HIDOE) your permission, the student's names and/or likenesses, photo, video, and/or audio may be used in HIDOE school-related publication print and analog/digital media.

Potential HIDOE uses:

- A playbill, showing the student's role in a drama production
- Annual yearbook
- Honor roll or other recognition lists and programs
- Graduation programs and announcements
- Sports activity programs or sheets, such as for wrestling, showing weight and height of student
- School newsletters
- Audio and video recordings to aid with reinforcing appropriate behaviors
- Audio and video recordings capturing those memorable moments, such as graduation ceremonies and May Day and other holiday programs or school events
- Student photographs for classroom, teacher, school and/or HIDOE use
- Officially recognized activities and events
- Participation in distance learning lessons or school activities

Hawaii student teachers participating in educator preparation programs and staff in professional development courses within the HIDOE may have access to student work and/or other student publications during the course of their studies.

By checking "yes" and signing the Student Publication/Audio/Video Release Form (RS 21-0480), parents, guardians, and eligible students provide permission for all potential HIDOE uses for HIDOE non-commercial, educational purposes and cannot select individual items.

By checking "No" and signing the Student Publication/Audio/Video Release Form (RS 21-0480), HIDOE and school will not publish or display the student's photo, names, their school work, and any recordings, including but not limited to, the potential HIDOE uses listed on the front and back of this form.

This form is valid for the student while she/he attends the school listed on the front of the form, and where the form was turned into, unless rescinded by the parent or eligible student or revision of the Student Publication/Audio/Video Release Form (RS 21-0480).

Highlands Intermediate School Summer School Closing Release Form

If an emergency situation occurs and we are required to close school early, we are asking you to indicate how your child should be released from school. We are also asking that you fill-in the necessary emergency information below. Thank you.

Print Student's Name: _____ Current Grade: 6 7 8

Mother's Legal Name (same as on gov't ID): _____

Home #: _____ Work #: _____ Cell #: _____

Father's Legal Name (same as on gov't ID): _____

Home #: _____ Work #: _____ Cell #: _____

The following individuals are also authorized to pick-up my child in an emergency situation:

Legal Name on ID: _____ Relationship: _____

Home #: _____ Work #: _____ Cell #: _____

Legal Name on ID: _____ Relationship: _____

Home #: _____ Work #: _____ Cell #: _____

Legal Name on ID: _____ Relationship: _____

Home #: _____ Work #: _____ Cell #: _____

Please select and mark only the options that you agree to using 1-3, with #1 being your first choice:

_____ It is OKAY for my child to walk home.

_____ It is OKAY for my child to catch the city bus home.

_____ I will come to the school to pick-up my child.

In an emergency school closure, the holding area for 7th graders will be the cafeteria. The holding area for 8th graders will be the Bandrooms. All parents and adults authorized to pick-up a student are required to bring a government issued ID and must sign out their child prior to leaving campus.

Parent Signature: _____ Date: _____

Noted:  _____, Principal