



## PARENT PORTAL USER AGREEMENT FORM

Parents Must Sign and Return this Form to Access Student Grades Online

By signing below I, as parent/guardian of child(ren) in a District school, verify and acknowledge that:

- \*I am at least eighteen (18) years of age and able to be legally bound by the terms of this Agreement;
- \*I am requesting access to my child(ren's) student information on the Mapleton Public Schools Internet web site;
- \*I have read the Mapleton Public Schools Parent Portal User Agreement and agree to abide by and support the terms of use and user expectations set forth in the Agreement to insure the safety and privacy of each student;
- \*By accepting this Agreement I, as parent/guardian, release the Mapleton Public School District ("District") from any and all liability for damages arising out of unauthorized access to my parent/guardian user account;
- \*I agree that I will not share my password or allow anyone other than myself to use my user account, including my own child(ren);
- \*I understand that, in the interest of security, the District reserves the right to change user passwords or deny access at anytime;
- \*I agree to protect or destroy any information printed or transferred to my computer, or otherwise generated from the District's site via the Parent Portal;
- \*I understand that three unsuccessful logins will disable my account; and
- \*If my account becomes locked I will contact the school office and request the account to be unlocked and I understand that the District, in its sole discretion, may request that I bring photo identification to the school in order to verify my identity and that it may take 3 to 5 school days to have my account unlocked.

*The information on this form must match the information you provided during registration of your child(ren) or on a subsequent Student Data Verification form.*

\*\*\*\*\* **All information is required!** \*\*\*\*\*

Parent/Guardian's First Name: \_\_\_\_\_

Parent/Guardian's Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_