

Student: _____ ID: _____ Grade: _____

Parent: _____

MALIBU HIGH SCHOOL
Parent/Guardian Signature Page 2017 - 2018

All policies will be reviewed with students at our Rules Assemblies. Please initial where indicated and provide your signature at the bottom.

SMMUSD DISTRICT POLICIES:

SMMUSD RIGHTS AND RESPONSIBILITIES BOOKLET

Initial Education Code Section 48980 requires school districts to notify parents or guardians of their rights and responsibilities. Education Code Section 48981 allows the notice to be provided in electronic format if requested by the parent or guardian. My signature below indicates my request to receive the SMMUSD Rights and Responsibilities Booklet electronically. I understand that that a paper version is available at the school.

Initial Education Code Section 48982 requires parents or guardians to sign and return this acknowledgment. By signing below, I am neither giving nor withholding consent for my child(ren) to participate in any program. I am merely indicating that I have received and read the booklet with notices regarding my rights relating to activities which might affect my child(ren).

CONTROLLED SUBSTANCE POLICY

Initial

WEAPONS AND DANGEROUS INSTRUMENTS

Initial

HATE-MOTIVATED BEHAVIOR

Initial

BULLYING

Initial

TOBACCO-FREE SCHOOLS

Initial

STUDENT USE OF TECHNOLOGY

Initial I have read the SMMUSD Telecommunications Acceptable Use Policy. I understand that network access and the Internet is a world-wide group of hundreds of thousands of computer networks. I know that the Santa Monica-Malibu Unified School District does not control the content of these Internet networks. When using the Internet, I realize that students may encounter material I might consider inaccurate, controversial or offensive. The Santa Monica-Malibu Unified School District has my permission to give Internet access to my child. I understand that my child may keep this access as long as the guidelines described in the Telecommunications Acceptable Use Policy are followed.

MHS SCHOOL POLICIES (from MHS Student Handbook):

DRESS CODE POLICY

Initial

ATTENDANCE GUIDELINES AND TARDY POLICY

Initial

CELL PHONE AND ELECTRONICS POLICY

Initial

CIVILITY POLICY

Initial

Parent or Guardian Signature

Date of Signature



Student Release Form
General Filming & Recording
For District Internal Use and External Public Relations Use

During the school year, students are occasionally photographed, filmed and/or recorded during school activities and field trips. For example, the recordings are:

- Utilized in Yearbooks
- Exhibited at school as part of curricular and extracurricular activities
- Published in internal/external newsletters, public relations materials and other District publications.
- Released to news and documentary organizations to recognize the work of the school and your students. These recordings may be published and broadcast.

This release allows your child to be recorded and for the District to use and circulate these recordings.

_____ I **agree** for my child to be photographed, filmed or recorded by representatives of the Santa Monica-Malibu Unified School District (District) and those organizations approved by the District. I herein grant the District and approved assignees the right to use my child's actual or simulated likeness, photograph, voice, video, personal characteristics and other personal identification (the recording) for use in all manner of media, throughout the world. I understand that the District or assignee is the sole owner of all right, title and interest, under copyright, in and to all recordings.

This release extends to the use of recordings for internal District use, external communication and District approved news/documentary programming. I agree that I am entitled to no additional consideration as a result of the rights granted herein. This release does not extend to projects where the subject would usually receive compensation for participation. Any use of the recordings in any manner other than those approved by the District is strictly prohibited and restricted.

_____ I **do not agree** for my for my child to be photographed, filmed or recorded by representatives of the Santa Monica-Malibu Unified School District (District) or other District organizations.

Student's Name (PLEASE PRINT CLEARLY)

Date of Birth

Signature of Parent or Guardian

Date

Parent or Guardian Name (PLEASE PRINT CLEARLY)



SANTA MONICA - MALIBU UNIFIED SCHOOL DISTRICT

2017-2018 ANNUAL PESTICIDE NOTIFICATION REQUEST

(Applicable Only for the Current School Year)

PARENTS: PLEASE READ AND COMPLETE THE INFORMATION BELOW AND RETURN IT TO YOUR SCHOOL PRINCIPAL

Parents/guardians can register with the school to receive notification of individual pesticide applications. Persons who register for this notification shall be notified at least seventy-two (72) hours prior to the application, except in emergencies, and will be provided the name and active ingredient(s) of the pesticide as well as the intended date of application.

Parents/guardians seeking access to information on pesticides and pesticide use reduction developed by the Department of Pesticide Regulation pursuant to California Food and Agricultural Code 13184, can do so by accessing the Department's web-site at www.cdpr.ca.gov.

Student Name: _____ Date of Birth: _____

Address: _____

City: _____ Zip Code: _____

Telephone No.: _____ Grade: _____

School: _____

Email: _____

Student ID#: _____

- I would like to be pre-notified every time a pesticide application is to take place at the school. I understand that the notification will be provided at least 72 hours before the application.

- I do not need to be notified every time a pesticide application is to take place at the school. I understand that the notification will be posted at least 24 hours before the application.

Signature of Parent/Guardian (if student is under 18)

Signature of Student (if student is 18 or older)