

DIXIE SCHOOL DISTRICT SKYWARD FAMILY ACCESS APPLICATION

To apply for Family Access, a parent (legal guardian) must read and complete this application. Completing the application for this account allows the Dixie School District to make student's school information available to the parent (legal guardian) by means of the internet on a website that is secure and accessible by a login username and password. One login username and password will be created per application, meaning that a unique username and password will be provided for the parent (legal guardian) signing this form. It is assumed that the parent (legal guardian) will share that same username and password with other parent(s) (legal guardians) in the family – If one or more of the other legal parent(s) (legal guardians) desires to have their own unique username and password, they need to complete a separate application. The digital records of students posted on Family Access can only be accessed by parents who have legal access to their student's written school records and have applied for a valid username and password. Parents (legal guardian) understand and agree that the Dixie School District is not responsible for unauthorized internet access to student's digital records by person's using Family Access login and/or passwords through parent (legal guardian) consent or negligence. Login username and password are to be kept secure within immediate households and not shared with anyone that is not allowed to see a student's school records. Note – Students in grades 6-12 will be given their own student username and password for accessing their information – As a result, parents/guardians do not have to share their username and password with their students. Parents (legal guardian) agree that in the unlikely event they are able to access information that they should not have access to, they will immediately contact the student's school. By signing this application, parents (legal guardian) confirm that they understand and accept the guidelines and conditions for access to their student's digital records and waive any claims or causes of action that they may have against the Dixie School District by reason of unintentional/disclosure through unauthorized access. Dixie School District's Administration has the right to turn off or suspend access to Family Access at anytime. The approved Family Access Application form is valid until your student(s) graduate or withdraws from Dixie School District

Please follow the instructions below for completing the application:

- 1. PART A - Must be filled in with current information by the legal guardian.**
- 2. PART B - Must list all students attending a Dixie School District school that you have legal access to view records on.**
- 3. PART C - Applicant in PART A, must sign.**
- 4. Submit the completed application, in person, to the school office at any one of your student's schools. You will also need to show a STATE ISSUED PHOTO ID.**
- 5. When your account is available an email will be sent to the address that you provide on this application. You will be directed to pick up your login and password from your child's school.**

APPLICATION INFORMATION:

PART A

(Please PRINT) Parent (legal guardian):

_____, _____
Last Name First Name MI Email Address:

SKYWARD FAMILY ACCESS APPLICATION PART B (

Please PRINT) List all students (**Full Legal Name**) which the Parent (legal guardian), in **PART A**, has legal access to view records:

1. Students Full Name: _____ Date of Birth: _____

School: _____ Grade: _____ Relationship to student: _____ **Does student live with parent (legal guardian) listed in PART A?** _____ YES _____ NO

2. Students Full Name: _____ Date of Birth: _____

School: _____ Grade: _____ Relationship to student: _____ **Does student live with parent (legal guardian) listed in PART A?** _____ YES _____ NO

3. Students Full Name: _____ Date of Birth: _____

School: _____ Grade: _____ Relationship to student: _____ **Does student live with parent (legal guardian) listed in PART A?** _____ YES _____ NO

4. Students Full Name: _____ Date of Birth: _____

School: _____ Grade: _____ Relationship to student: _____ **Does student live with parent (legal guardian) listed in PART A?** _____ YES _____ NO

5. Students Full Name: _____ Date of Birth: _____

School: _____ Grade: _____ Relationship to student: _____ **Does student live with parent (legal guardian) listed in PART A?** _____ YES _____ NO

PART C: THIS APPLICATION WILL NOT BE PROCESSED WITHOUT THE SIGNATURE OF THE PARENT (LEGAL GUARDIAN) IDENTIFIED IN PART A.

PARENT (LEGAL GUARDIAN) SIGNATURE DATE

*All information provided on this application will be for Dixie School District use only, unless disclosure is legally required.

FOR OFFICE USE ONLY

Application Processed Date: _____ Application Processed By: _____
School: _____ Parent (Legal Guardian) Skyward Name
Key: _____ Skyward Family ID _____