

GENERAL BROWN CENTRAL SCHOOL DISTRICT

General Brown Junior-Senior High School

17643 Cemetery Road
Dexter, NY 13634
Tel 315-779-2300 / Fax 639-3444

Brownville/Glen Park Elementary School

PO Box 10
Brownville, NY 13615
Tel 315-779-2300 / Fax 788-6976

Dexter Elementary School

415 East Grove Street
Dexter, NY 13634
Tel 315-779-2300 / Fax 639-6845



Board of Education

Jeffrey West, President
Daniel Dupee II, Vice President
Sandra Young Klindt
Jamie Lee
Brien Spooner
Cathy Pitkin
Michael Ward

www.gblions.org

Request for Permission To Access *Schooltool* Parent Portal Dashboard

My name is (please print): _____, and my e-mail address is _____.

I am a parent, guardian, or person in parental relation, of a student in the General Brown Central School District, namely:

Student Name: _____

If more than one student, check here and list all.

Student First Name	Student Last Name	Address Where Student Resides	Student Date Of Birth

I request that the District provide me with a login/password that will allow me to access information about my student's school performance, which could include classes, teachers' names, attendance, grades, discipline, and other information housed in the District's student management database. I understand that this information is stored in a database called *Schooltool*, which is maintained by the District with support from the Mohawk Regional Information Center of the Madison-Oneida BOCES. In return for the District providing me with a login/password, I agree to the following Terms of Network Access:

Please initial each item to acknowledge it, and sign at the end.

_____ I will maintain the e-mail address indicated above for the District to use to send pertinent information to me concerning my Student *Parent Portal* Dashboard Account.

_____ I will only attempt to view information about the student(s) listed above. I will not attempt to “hack,” manipulate, or otherwise try to evade the security measures to access information regarding any other person.

_____ I will not intentionally transfer to the *Schooltool* system any virus, Trojan horse, or other malicious computer code.

_____ If granted the ability (at a future time) to enter data into my child’s record, I will only enter accurate information.

_____ I understand that the District’s use of the *Schooltool* software is supported by technical assistance from the Mohawk Regional Information Center, Mindex Technologies Inc., and possibly other consultants, and employees of these entities. They are instructed to keep confidential any personally-identifiable information, including educational records, they may see in the performance of their duties. I consent to the disclosure of information about me or the student(s) listed above under these circumstances.

_____ I understand that all information stored in the *Schooltool* database remains the property of the District, and may be accessed, examined, or modified by the District or its vendors at any time.

_____ I understand that the *Schooltool* database may record and retain information about when and how I use Schooltool through the *Student Parent Portal Dashboard*, and that this information is the property of the District and subject to review by the District.

_____ I agree that I will not disclose my login password to any other person, not even other people in my family or household. I accept responsibility for all actions that are performed by anyone gaining access to the *Schooltool* database using the login password assigned to me.

_____ I understand that the District retains the discretion to block my access to *Schooltool* whenever it has reasonable suspicion to believe that I have violated one of the foregoing terms of accessing *Schooltool* and other Network resources.

Parent/Guardian/Person in Parental Relation

(Print Full Name) _____ Date: _____

(Sign Full Name) _____

For District Use Only:

Received By: _____ Date: _____

Processed By: _____ Date: _____