

Methacton School District

Google Apps for Education Opt Out Request Form

Parents/Guardians,

Methacton School District has implemented "Google Apps for Education" for students and teachers. Students in grades 5-12 will have accounts allowing for projects to be stored online and accessible from home, school, and anywhere there is an Internet connection. Students can access the GAFE site at: <https://drive.google.com/a/student.methacton.org>

Students will have access to Google Drive (30 Gb cloud storage) in addition to word processing, spreadsheet, presentation applications and Google Classroom.

Responsible Use Guidelines

Teachers will make every reasonable effort to monitor student conduct related to class content in order to maintain a positive learning environment.

1. Students will follow all rules, regulations, and guidelines covered by the district's Acceptable Use Policy (815).
2. Deliberate destruction or vandalism of other users' data or shared data is prohibited. Nothing should be deleted without the permission of the person who created it.
3. The District reserves the right to monitor all postings and activities in Google Apps.

Google and the Methacton School District take student privacy very seriously. Access to and use of the student's Google account is considered a privilege. MSD maintains the right to terminate the access and use of their Google account when there is reason to believe that violations of law or district policies have occurred. The alleged violation will be directed to the building principal and addressed according to the procedures outlined in the student handbook.

Information on Google's policies: <http://www.google.com/enterprise/apps/education/benefits.html>

Google Apps for Education Opt Out Signature

If you would prefer that your student not have access to GAFE please complete this form and return it your child's school. If you decide to limit your child's access to GAFE, please discuss with your student's teacher(s) any accommodations that will be necessary to complete assignments.

Student's Name (First, Last): _____ Grade _____

Parent/Guardian Signature: _____ Date: _____

Please return form to: Methacton School District

Technology Services
1001 Kriebel Mill Road
Eagleville, PA 19403