

BIOMETRICS ENROLLMENT PERMISSION FORM

_____ YES, PLEASE ENROLL MY STUDENT(S) IN THE BIOMETRIC SYSTEM.

_____ NO, DO NOT USE BIOMETRICS, PLEASE ISSUE MY STUDENT(S) A PIN NUMBER TO MEMORIZE.

STUDENT'S NAME

GRADE

PARENT'S SIGNATURE

DATE

INFORMATION WILL BE KEPT ON FILE UNTIL THE STUDENT GRADUATES OR LEAVES THE DISTRICT.