



CLEVELAND HILL
UNION FREE SCHOOL DISTRICT

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Please sign and return this form. This form gives your Cleveland Hill child(ren) permission to access Google Apps for Education and use our district's Chromebooks (laptops). Details are found on the attached pages. Failure to return this form may also prevent your child(ren) from accessing their important school files outside of school.

I, (print name) _____, grant permission for my
child(ren):

Names (please print)	Grade
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

to use the tools in Google Apps for Education. I understand that any personal user IDs, passwords, and documents and/or files stored in this tool are kept highly secure and confidential by Google, and that Google complies with all federal student privacy laws.

Parent signature: _____ Date _____