

# Consent Form *My Blueprint*



Dear Parent/Guardian:

\_\_\_\_\_ School will be using **My Blueprint** as a Career Education Resource. Students will be provided with personal user accounts for career education purposes. This form is initially completed at Kindergarten entry or by new students to Mission, and when a student is transitioning from Elementary to Middle, and Middle to Secondary School.

As a school district, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. This requires the school district to ensure families provide consent for educational digital resources. This is in accordance with [s.26\(c\) of the Freedom of Information and Protection of Privacy Act](#) (FOIPPA). Students' creations will be archived as an educational project under the authority of s.27(1)(a)(i) of FOIPPA and only accessible to the student who created it. In accordance with this Act, we must at all times protect the privacy of students under our care.

School Address and Contact Info: \_\_\_\_\_

\_\_\_\_\_ - School Principal

**PLEASE COMPLETE THE INFORMATION BELOW AND RETURN THIS FORM TO YOUR SCHOOL so that a My Blueprint account can be activated for student.**

## **CONSENT *myBlueprint*:**

I have read the above information from the above said school and understand that when implementing a web-based service we will be creating personal, private accounts for students. I understand that the objective of this service is to enable digital tools for students to explore education. Students who are not granted permission by their parents will not be penalized and alternative assignments will be provided. I also recognize that I may be invited to view my child's work in My Blueprint and as a guest I will be respectful of not sharing classroom photos that may be posted by my child.

☐ I consent to my child using *myBlueprint*.

By signing this Agreement, I on my own behalf or, as applicable, on behalf of my child, understand and agree that:

- Student's work in myBlueprint may be accessed by the student's teachers, school based administrator and myself as the invited parent.
- I also hereby acknowledge that I have read and understood the above information on the Use of **My Blueprint**. This consent will be considered valid **from the date at which it is signed**.

Student Name:	_____ (PLEASE PRINT: Usual First and Last Names)
Grade:	_____
Parent/Guardian Name:	_____ (PLEASE PRINT)
Parent/Guardian Signature:	_____ <i>*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.</i>
Date:	_____ (DD-MM-YYYY)