

Consent for Text Messages and Alerts-CPS Programs for Re-Engagement of Out-of-School Youth, Chronic Truants and Students Exiting Juvenile Facilities

Dear Parent/Guardian:

CPS staff members responsible for the re-engagement of out-of-school youth, chronic truants, and students exiting juvenile facilities may periodically want to send information regarding school or district outreach efforts for students in grades 7-12. The purpose of these communications is to assist students with enrolling in school, staying in school, and succeeding in school. We will utilize mobile device communications to text message or instant message (IM) you and your student regarding outreach efforts, updates, and initiatives. All school messaging communications are subject to the Acceptable Use of the CPS Network and Computer Resources policy.

To ensure you and your student receive these notifications, your consent is needed below. By signing this form, you are authorizing the Chicago Public Schools staff members noted below to send text messages to the phone numbers provided below. If you change your phone number or no longer wish to receive these communications and notifications, you agree to inform Chicago Public Schools immediately.

By signing below, you agree that this consent will remain valid and you and your student will continue to receive text messages or IM unless or until you revoke your consent. Standard messaging rates and data charges may apply.

Instructions: Check Box below to indicate your preference. Below is a list of all CPS staff members that may need to communicate with you and your student regarding outreach initiatives. Please initial next to the name of each CPS staff member that you authorize to communicate with your student.

- I CONSENT as outlined in the above section.
- I CONSENT as outlined in the above section, but I do not want to receive these text messages or IM myself. Please include another CPS staff member(s) in group texts with my child.
- I DO NOT CONSENT as outlined in the above section.

List of CPS staff that may need to communicate with your student:

Staff/Employee	Position	Reason for Communication	Supervisor Initials	Parent's Initials

Signature of Parent/Guardian

Print Name of Parent/Guardian

Student's Name

Student ID #

Date

School

Signature of unaccompanied youth
(as defined by 42 U.S.C. § 11434a(6))

Student's Phone Number for Messages: (_____) _____ - _____

Parent/Guardian Phone Number 1 for Messages: (_____) _____ - _____

Parent/Guardian Phone Number 2 for Messages: (_____) _____ - _____