

TOWN OF WEBB UNION FREE SCHOOL DISTRICT

3002 State Route 28, P.O. Box 38

Old Forge, New York 13420

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www.towschool.org

2021-2022

Request for Permission To Access Schooltool Parent Portal

(Please Print Clearly)

Parent/Guardian Name:

(Print:First,Last): _____

Email address: _____

____ I have signed up for access to Parent Portal in the past and know that I used the email shared above to gain access.

____ I have signed up for access to Parent Portal in the past but don't remember the email I used to sign up or need to update my email to the one shared above to gain access.

____ I have signed up for access to the Parent Portal in the past but do not remember my password.

____ I would like to sign up to access the Parent Portal for the first time.

Student First Name	Student Last Name	Address Where Student Resides	Student Birth Date

The mission of the Town of Webb UFSD, in collaboration with the community, is to foster academic excellence, create responsible citizens, and promote life-long learning.

I request that the District provide me with a login/password that will allow me to access information about my student's school performance, which could include classes, teacher names, attendance, grades, discipline, and other information housed in the District's Student Management Database. I understand that this information is stored in a database called Schooltool which is maintained by the District with support from the Mohawk Regional Information Center. By requesting access and by the District providing me with a login/password, I agree to the following Terms of Network Access:

Your signature indicates your agreement to abide by the **ALL** of the following:

- I will maintain a valid e-mail address that the District may use to send me the pertinent information concerning my Parent Portal Account.
- **I have supplied the email I would like to associate with my access on the front page of this document and will notify the school if there is a change to my email.**
- I will only attempt to view information about the student(s) listed above. I will not attempt to "hack," manipulate, or otherwise attempt to evade the protective security measures designed to limit access to information regarding any other person.
- I will not intentionally transfer to the Schooltool system any virus, spyware, or other malicious computer code.
- I understand that the District's use of the Schooltool software is supported by technical assistance from the Mohawk Regional Information Center, Mindex Technologies Inc., and possibly other consultants, and employees of these entities. They are instructed to keep confidential any personally-identifiable information, including educational records, they may see in the performance of their duties. I consent to the disclosure of information about me or the student(s) listed above under these circumstances.
- I understand that all information stored in the Schooltool database remains the property of the District, and may be accessed, examined, or modified by the District or its vendors at any time.
- I understand that the Schooltool database may record and retain information about when and how I use Schooltool through the Parent Portal, and that this information is the property of the District and subject to review by the District.
- I agree that I will not disclose my login password to any other person, not even other people in my family or household. I accept responsibility for all actions that are performed by anyone gaining access to the Schooltool database using the login password assigned to me.
- I understand that the District retains the discretion to block my access to Schooltool whenever it has reasonable suspicion to believe that I have violated one of the foregoing Terms of accessing Schooltool and other Network resources.

Parent/Guardian/Person in Parental Relation

(Print Full Name) _____ Date: _____

(Sign Full Name) _____

For District Use Only

Received/Processed By: _____ ***Date:*** _____

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