

Gobles Public Schools
Parent Portal Account Activation Request Form

Please print or type below Parent/Guardian information:		
First Name	Last Name	
Address		
City	State	Zip
Home phone	Work/Cell Phone	Email Address

Please list the students you wish to have access to:				
First Name	Last Name	Grade	Relationship	School

Parent Agreement

I am requesting access to my child (ren's) student information on the Gobles Public Schools Internet web site. I have read the Gobles Public Schools User Expectations and Computer Requirements for the Infinite Campus Parent/Student Portal and agree to abide by and support the expectations. I understand, for the interest of security, the District reserves the right to change user passwords or deny access at anytime. By signing this agreement I, as parent/guardian, release Gobles Public Schools from any and all liability or damages arising out of the unauthorized access to my parent/guardian account.

I agree that I will not share my password or allow anyone other than myself to use the account including my own child (ren).

Parent/Guardian _____ Date _____
(Signature)

Office Use Only:	
Photo Identification Required:	<input type="checkbox"/> Drivers License <input type="checkbox"/> Passport <input type="checkbox"/> State ID Card <input type="checkbox"/> Other (specify) _____
Approval _____ (signature)	Date _____