



Eastern Suffolk
BOCES

Educational Services That Transform Lives

**CONSENT FOR RELEASE OF
STUDENT PHOTOGRAPH**

(INTERNET WEBSITE OR OTHER MEDIA)

Date: _____ School Year

Activity: Student Photographs for Eastern Suffolk BOCES Internet Website or
Other Media

Summary: ESBOCES takes photographs or allows photographs of students to be taken for the purpose of informing interested school districts, parents, students and the public of the variety of programs offered by Eastern Suffolk BOCES and describing the services available in a particular program. ESBOCES may post your child's photo on its Internet website in connection with disseminating information regarding BOCES programs. The website or other media may include photographs of students, including your child as he or she goes through the school day at Eastern Suffolk BOCES.

Consent: If you consent to your child being photographed and posted on the BOCES website for the above purpose, you must sign and return the consent form no later than _____ so that your child may participate in this activity.

I, _____ give consent for
Parent's name

_____ to be photographed during
Child's name

the _____ 2005 - 2006 _____ school year for the purposes discussed above.

Date: _____
Parent's signature

Please return this form to the teacher with whom your child will be attending