Dear Parent/Guardian:

We are participating in a project requiring pictures of lessons taught in your child’s classroom for our Math Structures II class at Northwest Arkansas Community College. Although the pictures involve both the teachers and various students, the primary focus is on the teacher’s instruction, not on the student in the class. In the course of taking pictures, your child may appear in a photograph. No student’s name will appear on any materials that are submitted and all materials will be kept confidential. The form below will be used to document your permission concerning taking photographs of your child in a classroom environment.

Thank You,

EMPACTS Student Team Members:

______________________________

Permission Slip

Student Name: ____________________
Teacher/Grade: ____________________

I am the parent/legal guardian of the child named above. I have received and read the letter regarding possible photographs of my child.

☐ I DO give permission to you to include my child’s picture as he or she participates in a class conducted at _________________ by _____________________________, EMPACTS students of NWACC.

☐ I DO NOT give permission to you to include my child’s picture.

Signature____________________________ Date ____________________
(Parent/Guardian)