

Home Base Parent Portal: Application for Access

Please complete all fields on this form and either mail or hand-deliver both pages to your child's school. Incomplete or illegible applications will not be processed. Once the completed form has been received and verified, the school will provide the parent/guardian with a letter containing an access ID and password. The letter will also include instructions for setting up the Parent Portal account and adding your child to the account.

If you plan to mail this form to the school, the form MUST be notarized. If you plan to deliver this form to the school, the form does not need to be notarized, but you will be asked to provide a photo ID to appropriate staff at the school.

Parents with multiple students in the Randolph County School System must submit one form per student to the appropriate school.

PARENT INFORMATION						
First Name: M		Middle Initial: Last Nar		me:		
Home Phone:			Cell Phone:			
State	:			Zip:		
Email:						
STUDENT INFORMATION						
Middle		Initial:	Last Na	me:		
Student Number:						
Date	of Birth:			Home Phone:		
Address:						
State	:			Zip:		
Are there any legal restraints prohibiting a parent/guardian from having access to this student's data? Yes No If yes, please attach a copy of the court order.						
I verify that I am the parent/guardian of the student named above. I also verify that there are currently no legal restraints that would prohibit my access to the student's data and agree to advise my student's school of any need for a change of access to the student records. I understand that the Randolph County School System reserves the right, in its sole discretion, to grant or deny access to the Parent Portal, in accordance with the U.S. Family Education Rights and Privacy Act (FERPA). I also understand that the data contained within the Parent Portal (the "Data") includes student records protected by FERPA, and I agree to keep the Data strictly confidential. I also agree to keep my Parent Portal password confidential and will not share it with anyone. I will make no attempt to alter or destroy Data and will report to the school administration any attempts to do so or any security concerns that may arise. I understand that failure to abide by the terms of this Agreement will result in the termination of my Parent Portal account. Parent/Guardian Signature: Date:						
	State: g a paren order. the stude: g data an Randol; cordance the Pare al. I also lter or de	State: Middle Date of Birth: State: a parent/guardian order. he student named a data and agree to Randolph County cordance with the the Parent Portal al. I also agree to lter or destroy Date. I understand the	Cell Phone State: Middle Initial: Date of Birth: State: a parent/guardian from having order. he student named above. I also a data and agree to advise my see Randolph County School Systordance with the U.S. Family the Parent Portal (the "Data") al. I also agree to keep my Paralter or destroy Data and will refer to the control of	Cell Phone: State: Middle Initial: Last National Date of Birth: State: St		

For Notary I	Public Use Only				
tate of, County of,					
I,, a Notary Public for said county and state, do hereby certify that					
personally appeared before	re me and acknowledge the due exchange of the forgoing				
instrument.					
Witness my hand, and official seal, this the day of					
(Notary Public) Official States of the Control of	eal				
DO NOT WRITE BELOW THIS LINE					
For School (Office Use Only				
Approved:	Date access number sent:				
Denied: Reason:	Access number sent by:				
Access code sent via: Hand delivered to parent	Standard mail				