Catoosa County Public Schools Parent Portal Acceptable Use Procedure Acceptance Form

Parent/Guardian Last Name:		_First Name:	
Names of ALL your childre County Public Schools:			
Student Name	Your Relationship to Student	School	Grade
			,
I have read and understan Guidelines and System Reunderstand that if I violate privilege to use the Parent Father/Guardian1 Inform	equirements, and I agree to any of the terms of this Acc Portal and may be liable fo	abide by and support the	nese rules. I , I may lose n onsequences.
Name:		Name:	
Relationship:		Relationship:	
Home Address:		Home Address:	
City, State & Zip:		City, State & Zip:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	
Cell Phone:		Cell Phone:	
Email:		Email:	
Employer:		Employer:	
Legal Guardian:YesNo Resides with:YesNo		Legal Guardian:YesNo Resides with:YesNo	
	ou .	Resides with:Yes _	No