

BORDENTOWN REGIONAL HIGH SCHOOL

Student Class/Activities Group Communications Form

Teacher/Coaches Name _____

Teacher/Coaches Name _____

Student Group _____

Number of Students in group _____

Online Platform Used _____

(Remindme101, Celly, Edmoto, etc.)

Logon Information including password

Specific reasons for use of communication platform:

I have read and understand the Bordentown Regional School District BOE Policy 4119.26.
My signature confirms that I will follow the guidelines associated with student contact
according to that district policy.

Teacher(s) Signature(s) _____

Approved

Not Approved

Principal Signature _____