



Palos Verdes Peninsula Unified School District

Dear Parent or Guardian,

I will be supplementing my instructional program with the following free online resource(s) to reinforce instruction in the classroom. Students will be encouraged, but not required, to use these resources. These website(s)/app(s) often need students to have a user name and password. In some cases, I will be providing your child with his/her log in information. In other cases, your child will be asked to create his/her account. User names and passwords will not require students to identify themselves by their full name. I will provide you with information as I introduce each new resource. Please complete the form below and return it to me

by _____ .

Please contact me if you have any questions.

Teacher Name

Contact information

The following website/app will be used: _____

Description/purpose of the website/app:

Please check one box, sign, and return to teacher.

I give my child, _____, permission to use.
(print child's name)

I do not give my child, _____, permission to use.
(print child's name)

Parent signature

Date

School/Grade