

PARENTAL CONSENT FOR ZOOM USE

Dear Parent/Guardian:

_____ Parish is providing distance-based learning through which Religious Education staff will facilitate classes and program activities through Zoom, a third-party platform that parents/guardians, students and/or staff will access via the Internet. Students should not create Zoom accounts and should only join meetings with parental consent from the link provided by their teacher. We are following strict norms in our use of Zoom to keep our students safe, including the following:

- Teacher control of video and audio feed
- Disabling of the “chat” function so students cannot “pass notes” privately to each other
- Required teacher use of the “waiting room” feature to keep intruders out
- Disabling of file transfers through Zoom
- Only posting Zoom links in parent emails
- Ability to remove participants immediately from any session
- A prohibition on any recordings or screen-captures of students in a Zoom session by participants.
- Classes will not be recorded by the Religious Education program. Students who miss a session or need to review content will be provided with session materials.
- Maintaining Safe Environment protocols including having two VIRTUS trained adults in each session.

This letter seeks consent for your child to utilize Zoom for distance-based religious education program purposes. Please be aware that Zoom collects information about its users and has its own privacy terms and conditions to which members must adhere. Please review Zoom’s privacy terms and conditions carefully before consenting: <http://zoom.us/terms> and <http://zoom.us/privacy>.

Please complete the attached form to record your consent for your child’s participation and use of Zoom. Please return the completed form to _____. If you have any questions, please feel free to contact _____.

Parent/Guardian Permission

I, _____, parent/guardian of _____, give permission for him/her to participate in distance-based online religious education via Zoom. I understand that my child will be expected to participate in Zoom classes over the internet from home for Religious Education. My child's name will need to appear on the screen during their weekly class. I will ensure that my child is engaged in their online class and have a place appropriate to learn without distractions. I understand that my child will be expected to appear on camera during each Zoom class and be able to respond with the microphone in the group discussion and by the public chat option. If my child uses the camera and microphone features on the Zoom platform, my permission is implied and granted.

Parent/Guardian’s Email Address _____

Parent/Guardian’s Signature _____

Date _____