



Home Base/PowerSchool Parent Portal: Application for Access – Notary

Instructions: Please complete all fields. Completed forms should be signed in the presence of a Notary Public and returned to your student’s school. Once the form has been accepted and processed, the parent/guardian will receive information containing activation instructions for the Parent Portal account. Follow the instructions provided to start using the account. **Parents with multiple students in CHCCS must submit one form per student to the appropriate school(s).**

Parent/Guardian Information:		
First Name:	Middle Initial:	Last Name:
Relationship to Student:		
Home Phone:	Work Phone:	
Street Address:		
City:	State:	ZIP Code:
Email Address:		

Student Information:			
First Name:	Middle Initial:	Last Name:	
Student ID Number:	Grade Level:	Date of Birth:	
Street Address:			
City:	State:	ZIP Code:	Home Phone:
<i>Are There any legal restraints prohibiting a parent/guardian from having access to this student’s data?</i>			
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		If yes, please attach a copy of court order.	

I verify that I am the parent/guardian of the student named above. I understand that the Chapel Hill-Carrboro City Schools reserves the right to grant or deny access to the Parent Portal in accordance with the U.S. Family Education Rights and Privacy Act (FERPA). I also certify that I will advise my student's school of any issues resulting in a need for change of access to student records. I agree to keep my password and the data contained within the Parent Portal confidential. I also agree that I shall 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. Failure to abide by the terms of this agreement will result in the termination of my account.

Parent/Guardian Signature:

Date:

For Notary Public Use Only:

State of _____, County of _____

I, _____, a Notary Public for said county and state, do hereby certify that _____ personally appeared before me and acknowledged the due execution of the forgoing instrument.

Witness my hand, and official seal, this the _____ day of _____, 20_____

(Notary Public)

Official Seal

DO NOT WRITE BELOW THIS LINE

For Office Use Only

Approved:

Date Access Number Provided:

Denied: Reason:

Approved By: