Powell County Schools Infinite Campus Portal for Parents/Legal Guardians Agreement

I am requesting access to my child/children's student information on the Powell County Infinite Campus Portal for Parents/Legal Guardians website. I have read the Powell County Infinite Campus Portal for Parents/Legal Guardians Acceptable Use Policy and agree to abide by and support the expectations. In order to protect the confidentiality of the student records, all parent/legal guardians who want to use this service are required to complete this agreement. A photo ID may be required. This agreement and account will remain in effect until a student withdraws/graduates from the Powell County School District or a court action denies the parent/guardian access to the student's information.

Parent/ Legal Guardian

Name: (one name per form)						
	First Name		Iiddle Name	Last Nam	Last Name	
Parent/Legal Guardian Home Address:						
(Street Addres				(State)	(State) (Zip)	
arent/Legal Guardian Iome Phone ()		Work Phone ())		
Parent/Legal Guardian Email Add	ress:					
Please list all students currently enrolled in the Powell County School District. Student Name	Your relation to Studen (e.g.) moth	t	Reside with Studen (Yes or No)	t School Buildi	Grade ng Level	
I certify that all of the above inform of the student(s) listed above.	mation is true o	and I	have legal authori	ity to access the	records	
Signed Signature must be that of the P		Date				
Signature must be that of the P	arent/Legal Guar	dian sl	nown on the first line.	(mm/dd	/yyyy)	

Important: Once the above information is verified and processed, you will receive your Parent Portal Activation Key along with directions on how to access the site and create your user name and password.

All parents who live locally must present identification at a school or central office to be able to obtain an account. If the parent or guardian lives in another city, state, or country and can not come to the office, please fax a copy of identification and this form to Meredith Robinson at 606-663-3303. You may also scan this document and a copy of your license and e-mail it to meredith.robinson@powell.kyschools.us