Request to Text Message Students

Employee's name (print): Provide a brief description of the class/group that will be using the electronic communication tool and the purpose of the intended use.	
your o	to communicating with students via text messaging, you must obtain written approval from campus principal on this form and must obtain prior written permission from the /guardian of each student on the CCISD Text Communication Authorization Form. In on, you must follow one or more of the following procedures, as directed by your principal:
	You may only text message with students using the following group messaging application(s)
	You must include the student's parent as a recipient on all text messages.
	You must include (immediate supervisor or designee) as a recipient on all text messages.
	You must send a copy of the text message to your district email address.
verify	(employee name) verify that I am aware of the relevant t policies and regulations regarding electronic communications with students. In addition, I that I have reviewed the policies and regulations relating to acceptable use of electronic unications. See CQ(REGULATION) and DH(LOCAL).
Emplo	yee's signature:
Emplo	yee's cell number that will be used for this purpose:
Date:_	
	proved
□ De	enied
Princip	pal's Signature: Date:

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