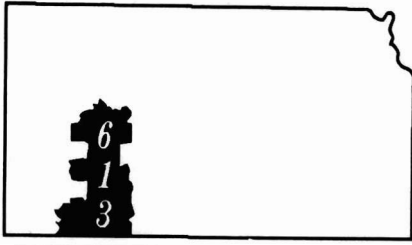


Southwest Kansas Area Cooperative District #613



001 Ford Street

Ensign, KS 67841

Phone: (620) 865-2054 Fax: (620) 865-2055

Website: <http://www.skacd.com>

"Providing Exceptional Education for Exceptional Children"

I _____, hereby give Southwest Kansas Area Cooperative District 613 permission to video tape my child _____ during **his/her** activities in the classroom. This video tape will be used to improve the teacher's work with your child in the classroom. This video tape will only be shared with the parents and teacher.

Signed _____

(Parent or Guardian)

Date _____

Signed _____

(Classroom Teacher)

Date _____