



PARENT PORTAL ACCESS FORM

Information request for Parent Portal Access

Please use this form to amend an e-mail address for any contact with Parent Portal access as this information will affect log-in status

Name of Student(s) in Mechanicville City Schools: _____

Name of Person Requesting Access: _____

Relationship to student(s): _____

E-Mail Address to be used for Parent Portal Access:

_____ @ _____

(No AOL or Roadrunner Accounts)

Note: This form must be completed in its entirety and returned to the Middle School Office in order for access to the parent portal to be granted.

Parental Authorization to Add Portal Access

Note that without a PARENT/GUARDIAN signature below,

No authorization to the parent portal will be granted

Parent's Name (signature): _____ Date: _____

Parent's Name (print): _____