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Albany Library Project Opt In Form

The Albany Public Library and Greater Albany Public schools are working together to provide access to more educational resources to your child. The purposes of this project is to improve Public library card access to Greater Albany Public School students. With your permission to share the listed information below, your child will be able to use their student body card to access online and hardcopy materials from the Albany Public Library. This will make resources such as books, animated learn-to-read books, eBooks and online collections, databases, and research tools available to more families.

By signing this form, GAPS will share with the Albany Public Library:

- Student's first and last name
- Student District database number
- Residential address, city, zip code
- Parent/Guardian contact name
- Contact phone number
- Email address (if available)

Yes, please share my student's information with the Albany Public Library. This information will allow access to resources using the student body card and that this information will not be shared with any other party without my additional express written permission. I understand that this permission will remain in effect until my child is no longer enrolled in Greater Albany Public Schools. To discontinue this service, contact the school office manager in writing to remove the permission.

Student's Name

Grade

Parent/Guardian (Please Print)

Parent/Guardian Signature

Date