



NORTHRIDGE CHRISTIAN ACADEMY

Parent Internet Viewer Electronic Grades/Attendance Access

Signatures on this form must match those found on the Emergency Card at the school.

Student Name	Student ID#
Home Address	Home Phone
Father's Name	Work Phone
Mother's Name	Work Phone
Father's E-mail Address	
Mother's E-mail Address	

I _____, the primary parent/legal guardian request a password to access my student's grades and attendance via the Internet. I understand that a password will not be given to my student. It will be e-mailed to both parents as listed above.

(This form must be signed in the presence of a Notary Public. A Notary is located at the school.)

Parent/Guardian Signature Date

Office Use Only
Verification Date
Verification Signature

STATE OF FLORIDA, COUNTY OF _____

I hereby certify that the foregoing was executed before me on this _____ day of _____

Notary Public, State of Florida My commission expires _____

Office Use Only	Date Entered		Date E-Mail Reply		Password Assigned
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