



SOCIAL MEDIA SITE APPROVAL

Na	me:									
School:					Date:					
I am planning to use social med				al media f	dia for the school year.					
Soc	cial media s	ites I p	lan t	o use inc	lude:					
	Blog			Wiki			Facebook		Twitter	
	Other (be s	specific	c):							
IMPORTANT : Once you have established a URL and/or specific social media account, your Administrator/immediate supervisor needs to be notified of the address or name.										
The purpose for which I plan to use social media includes the following: Increased communication between the home and school environments Celebrate the learning in my classroom Provide information about upcoming events in the school and classroom Provide an extension to the standard classroom environment Sharing of resources Meeting specific outcomes of a curriculum Professional learning communities Other (be specific):										
	ase note: If	f an ad	lditio	nal social	media s	site a	ccount is creat	ted in the s	same school	
year, this form may be amended to indicate same.										

Signature:	
Date:	
Administrator/Supervisor Approval:	
Date:	
NOTE: A copy of this form must be main school year.	ntained at the school for the duration of the
Once approval is granted, contact you appropriate implementation of the so	our Digital Learning Coach for support in the cial media site.
☐ Digital Learning Coach contacted	Date:

I HAVE READ AND UNDERSTAND that I will be held accountable under AP 143 Social Media for what is posted and shared and will abide by the Administrative Procedure.