

PEMBROKE ACADEMY
Parental Internet Access Form

PLEASE PRINT ALL INFORMATION LEGIBLY!

Student name: _____

Year in school (grade or class): _____

Parent/guardian name: _____

Parent/guardian email address: _____

I request a password to access the online records of my student as listed above.

Parent/guardian signature: _____

Date: _____

Your login information will be emailed to the address given above.

Please return this form to the Main Office.