Infinite Campus Parent / Guardian Identification Form

Return this form to Athena Library. Photo ID must be copied at this time.

Copy of Parent / Guardian ID:

Once the information provided on this form is verified, you will be sent your Infinite Campus Activation Key to the email address you provide below.

PLEASE PRINT, ONLY ONE PARENT / GUARDIAN PER FORM

(PLEASE CHECK) Primary ____ 2nd Parent ____

Parent / Guardian Name: _____

Parent / Guardian Address: ______

Parent / Guardian Email Address (**Required**)

Parent / Guardian Home Phone #:	
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_____ Cell #: _____

Please list all children enrolled at Athena Middle School	Your relationship to student	Reside with student? (yes or no)	Grade Level

OPTIONAL: I give permission for ________ to have access to the Infinite Campus Parent Portal to view my child's information. (Note: This would be an adult not currently registered to view your child's account, and can be an extended family member)

I certify that all of the above information is true and I have legal authority to access the records of the student(s) listed above.

SIGNED: DATE:	
Office Use Only:	
Date Returned: Name on Infinite Campus ID Verified	
Verify email Activation Key Sent Date Key Sent	Initials