



INFINITE CAMPUS PARENT/GUARDIAN ACCESS REQUEST FORM

Belton School District can provide access to student records via the Internet. In order to protect the confidentiality of student records, all parents/guardians who want to use this new service are required to fill out this form and return it **in person** to any one of your students' schools. Please bring a **photo ID** with you when you return the form.

Please Print

Parent/Guardian Name: *(one name per form)*

(First name, middle initial, last name)

Parent/Guardian Home Address: _____

(Street address) (City) (State) (Zip)

Parent/Guardian Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____

Parent/Guardian E-mail Address: _____

Please list all students currently enrolled in Belton School District Student Name	Your Relation to Student (e.g., mother)	Reside with student? (Yes or No)	School	Grade Level

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: _____

Signature & I. D. must be that of the Parent/Guardian shown on first line (mm/dd/yyyy)

Important—Once the information provided above is verified and processed, you will receive your Infinite Campus Activation Key. Once you receive the Activation Key, you will be able to access the Campus Portal via the Belton School District web site <http://www.beltonschools.org/> and create your User Name and Password.

Office use only:	Date Returned: _____	Received and Verified By: _____
Verified: <input type="checkbox"/> Identification	<input type="checkbox"/> E-Mail	<input type="checkbox"/> Activation Key Provided
Completed Date: _____	Initials: _____	