**Ames Public Library – Coding For Kids**

**COPPA COMPLIANCE FORM**

Dear Parents of school-aged children under the age of 13,

This program uses several computer software applications and web-based services, operated not by the library, but by third parties. These include the Hour of Code website, Scratch, Tynker, etc. A complete list of the programs with the privacy policy for each can be found here: http://gofisk.com/code/coppa

In order for your child to use these programs and services, certain personal identifying information -- generally the student’s name and email address -- must be provided to the web site operator. Under federal law entitled the Children’s Online Privacy Protection Act (COPPA), these websites must provide parental notification and obtain parental consent before collecting personal information from children under the age of 13. For more information on COPPA, please visit <https://www.ftc.gov/tips-advice/businesscenter/guidance/complying-coppa-frequently-asked-questions>

The law permits me (Scott Fisk) to consent to the collection of personal information on behalf of all of participants in this class, thereby eliminating the need for individual parental consent given directly to the web site operator.

This form when completed below and on file with me will constitute consent for me to provide personal identifying information for your child consisting of first name, last name, an email address and username. Check the OPT-IN box below. If you do not want your student to participate in these programs, select the OPT-OUT box below.

**Participant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Participant Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Participant Username:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check One:** OPT-IN \_\_\_\_ OPT-OUT \_\_\_\_

For questions contact: Scott Fisk, Instructor (code@scottfisk.org)