

PORT TOWNSEND SCHOOL DISTRICT NO. 50
Social Media Account Registration Form

Staff are allowed to set up social media accounts for schools, programs and departments. These accounts must be approved by the Communications Director, and all posts on these accounts are public records. Staff must agree to the page/account owner requirements outlined below. Please complete and return this form to the Communications Director. Once approved, you will be required to register the account with ArchiveSocial, the district tool that archives social media content per state law. The Communications Director will send you an email with instructions on how to register with ArchiveSocial following approval of the account. Many staff have accounts that do not represent their school or program, but do represent them or their classrooms. If your account meets at least one of the following criteria, it must be registered with the communications office:

- The account is connected to your firstlast@ptschools.org OR firstlast@g.ptsschools.org email address.
- The account's primary purpose is to promote your classroom, school, or district.

If you are not sure, contact the Communications Director. We want to talk to you and help you figure it out.

Account Type: Please submit a separate form for each social media account.

Facebook Page Twitter Instagram YouTube Vimeo

Proposed Social Media Name: _____

Email Account Associated with Account: _____

Password Associated with Account: _____

Leave Password blank if setting up a Facebook account. Instead of providing a password, please set the Communications office as a Page Administrator after the page is set up. The Communications office will provide instructions after approval.

As the social media account administrator, I agree that: The social media account I am setting up is for the purpose of communicating information about my school, program, or department with students, families, and/or staff. This page is not intended to replace a teacher page on a school website and will not be used to communicate course-specific information, such as assignment deadlines or grades. This page will be for: (describe the purpose of the social media account and who the intended audience will be).

I agree to the following:

- My principal or department head has given me approval to start and maintain this social media account. My principal or a designee will have administrative access to this social media account at all times and has agreed to periodically monitor the page.
- I will administer this social media account using my Port Townsend Public Schools email address as the contact email (firstlast@ptschools.org).
- My Facebook page will be a page (a “group” or a “page” meets this guideline) that allows students, staff and families to “like” my page, rather than “friend” my page. I verify that my page will not be an “individual” page that individual students, family members or staff can “friend.” (Note: This does not apply if you are registering a social media account that is not on Facebook).
- I will ensure the account meets the social media provider’s terms of use.
- I will not post or discuss individual student data on this social media account and will otherwise comply with the data-sharing requirements of the Family Educational Rights and Privacy Act (FERPA).
- I will not post pictures, video or information on this social media account associated with students who have signed an opt-out form.
- I will not discriminate against students or family members who choose not to participate on social media and who therefore do not have access to this account.
- I will not use this social media account as the exclusive form of communication for my school, program or department, to ensure that those who do not use Facebook still have access to the information.
- I have read and understand Port Townsend Public Schools Policy No. 4026 and 4026P.
- I will provide updated username and password information to the Communications office if it is changed.
- I will register my account with ArchiveSocial, the district tool that archives social media content.

Employee Name: _____(Please print)

Employee Signature: _____ Date: _____

As the principal, designee, or central office department head, I agree that:

- I give approval to _____ (Employee's name) to start and maintain this social media account.
- I will have administrative access to this social media account at all times.
- I will periodically monitor this social media account.
- I will ensure that this employee follows the guidelines outlined above.

Name: _____(Please print)

Signature: _____

Date: _____

Please return completed form to communication@ptschools.org.