

**Brother Martin High School**  
**Authorization to Use Online Learning Platform**

I/we, parent(s) of \_\_\_\_\_, hereby grant permission  
(Student's Name)  
to and authorize Brother Martin High School to provide live, online instruction by means  
of an online learning platform chosen by Brother Martin, in lieu of in-person instruction,  
to our child, in the event that Brother Martin High School must close during the  
2022-2023 school year

Student's Name \_\_\_\_\_

Student's ID Number \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Parent's Printed Name \_\_\_\_\_

Date \_\_\_\_\_