

Al Iman Institute

CELL PHONE AGREEMENT

I, _____, request that my child,
Parent's Name
_____, be permitted to have

his/her cell phone at school. My child and I understand that the phone is to be turned off and kept out
Student's Name
of sight during school hours. I also understand that if my child uses the phone during school hours, the
phone will be taken to the office where it will remain until a parent comes to the office to retrieve it. I
am aware that the school is not responsible for lost or stolen cell phones.

Parent Signature

Date

Student Signature

Date
