



FLEX Parental Authorization for Deviation from Student's Legal Name

FLVS Username		Parent/Guardian First Name	
Student Legal First Name		Parent/Guardian Last Name	
Student Legal MI		Phone Number	
Student Legal Last Name		Relationship to Student	
Birth Date (MM/DD/YY)		School Name	

Pursuant to the requirements established by the Florida State Board of Education in Rule 6A-1.0955 Education Records, Florida Virtual School is required to develop a form to obtain parental consent whereby parents may specify the use of any deviation from their child's legal name in school. Without this consent, school personnel are obligated to use your student's legal name as it appears on their birth certificate. If you consent to Florida Virtual School using a name for your child that is different than the legal first name on your child's birth certificate, then please complete and return this form to Florida Virtual School.

This consent authorizes Florida Virtual School personnel to use the parent/guardian approved name/nickname, as indicated below, for my student. I understand that this name/nickname will be entered into the Florida Virtual School's student information system (Focus and/or VSA, as applicable).

I, _____ authorize my student, _____ to be referred to by the following approved name/nickname:

Parent Signature: _____

Date: _____

Please upload completed and signed form to My Documents ([upload instructions](#)) in your student's account or email to NicknameApproval@flvs.net.