

SHERMAN INDEPENDENT SCHOOL DISTRICT

EMPLOYEE RESPONSE FORM

Employee's Name _____ Campus _____

Our district maintains a Web site updated periodically with employee pictures on campus Web pages. Please sign below to indicate whether or not your picture may be used for these purposes.

My picture **may** be used on the school and district Web sites.

My picture **may not** be used on the school and district Web sites.

Employee Signature _____

Date _____

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