EPal Permission Slip

I am excited to announce that I am initiating a French "EPal" Program for our Murrieta Valley High School French students. Epals are pen pals via email.

I have connected with Katherine Bourigault, an English teacher in the south of France. We will be pairing our students up to write emails and to send video messages to each other. Some of the messages will be required in French, and some in English, so that everyone has the opportunity to communicate in their second language. They will be required to "cc" the conversation to me in order to receive credit.

Students may wish to continue to communicate with their Epal, outside of the class assignments. These communications would not be monitored by the teacher. It will be the responsibility of the parent to establish any boundaries for emails outside of the class assignments.

Through the Epal Program, our MVHS students will have the opportunity to learn about life in France through the eyes of a French student close to their age. They will experience French culture on a more personal level, and may develop a lifelong friendship with their EPal.

Mme. Bourigault teaches at: Collège/Lycée St Joseph Nay Rue des Abbès Dupont 64800 Nay France http://www.stjoseph-nay.com/ Please fill out this form, choosing one of the three options provided, and return it to Mme. Marsolais. Please PRINT the email address CLEARLY. _ I give permission for my son/daughter, _____ (student name) to participate in the French EPal program. You may share the following email address with Mme. Bourigault and with one of her students so that they may communicate directly with my son/daughter. email address: -or-_ I give permission for my son/daughter, ____ (student name) to participate in the French EPal program. I would prefer that my student participate using Mme. Marsolais' school email address for this project. -or-I do **NOT** give permission for my son/daughter, _____ _____ (student name) to participate in the French EPal program. Please provide an alternate assignment. Parent/Guardian Signature: ______

Date: