Dear Parent or Guardian:

Characterized is an app for school counselors, parents, and students. It was designed to help students track and improve various areas of their lives through self-assessments and challenges.

Characterized combines students’ love of cell phones and selfies with the advanced motivation that comes from competition and incentives. This app allows students to visually see areas of development they might need to improve by having them complete a college and career readiness selfie and profile inventory. By allowing students access to Characterized, counselors will be able to send students and parents automated challenges and reminders to improve habits in areas in which the student struggles. After the challenges are completed, the students can take a new college and career readiness selfie so they can see improvements they have made after completing their challenges.

To access Characterized, students and guardian(s) must create an account. Characterized will not sell your information and will not share any more of your information than is needed for the application to function. For more information, see the Privacy Policy at http://characterizedapp.com/privacypolicy.html or on the “terms of use” that appears after you create an account on the app.

The Family Educational Rights and Privacy Act and the Protection of Pupil Rights Amendment (PPRA), which are in place to protect parent rights and student data require your permission to use applications such as Characterized. Please understand that under these laws, your child cannot use this application without your permission and signed consent. Characterized does have students answer question about difficulties they are experiencing, and by signing this form you consent to allow them to be asked these questions. To see the surveys used in the app, please contact your counselor.

By signing this form

☐ I give permission for my child to use the Characterized app with his or her counselor.
☐ I do not give permission for my child to use the Characterized app with his or her counselor.

Student’s name_________________________ Grade_________ Student’s Age___

________________________________________          _________________
(Parent/Guardian signature)               (Date)