

ID# _____
Sem/Hr _____

Office Use Only

Technology Department Use Only

TECHNOLOGY USAGE
(Student User Agreement)

Student Name _____
First MI Last Grad Year

User names are assigned based on first letter of first name and entire last name. Your initial password will be your entire last name and the number one (johnson1). You will be able to change your password at any time. Do not use passwords that are easily guessed by others. It is suggested that your password be changed periodically.

I have read the North Andrew R-VI School District Technology Usage policy, regulation and netiquette guidelines and agree to abide by their provisions. I understand that violation of these provisions may result in disciplinary action taken against me including, but not limited to, suspension or revocation of my access to district technology and suspension or expulsion from school.

I understand that my use of the district's technology is not private and that the school district may monitor my use of district technology including, but not limited to, accessing browser logs, email logs, and any other history of use. I consent to district interception of or access to all communications I send, receive, or store using the district's technology resources, pursuant to state and federal law, even if the district's technology resources are accessed remotely.

Signature of Student Date

Name of School: _____

TECHNOLOGY USAGE
(Parent/Guardian Technology Agreement)

I have read the North Andrew R-VI School District Technology Usage policy, regulation and netiquette guidelines, I understand that violation of these provisions may result in disciplinary action taken against my child/ward/child within my care including, but not limited to, suspension or revocation of my child or ward's access to district technology and suspension or expulsion from school.

I understand that my child or ward's use of the district technology is not private and that the school district may monitor my child or ward's use of district technology including, but not limited to, accessing browser logs, email logs, and any other history of use. I consent to district interception of or access to all communications sent, received or stored by my child or ward using the district's technology resources, pursuant to state and federal law, even if the district's technology resources are accessed remotely.

I agree to be responsible for any unauthorized costs arising from use of the district's technology resources by my child/ward/child within my care. I agree to be responsible for any damages incurred by my child/ward/child within my care.

- I **give** permission for my child or ward to utilize the school district's technology resources.

- I **give partial** permission for my child or ward to utilize the school district's technology resources. I do not wish for my child or ward to utilize: _____

- I **do not give** permission for my child or ward to utilize the school district's technology resources.

Name of Student: _____

Name of School: _____

Signature of Parent/Guardian

Date