

PLEASE RETURN TO SCHOOL

Acceptable Use of the Internet Agreement

STUDENT AGREEMENT

I understand and agree to the terms of the Stamford Public School's Acceptable Use of the Internet Policy. I understand that any violation of these terms may result in the loss of Internet access privileges through the Stamford Public Schools' network, the imposition of disciplinary measures and legal action. I also agree to report any known or suspected misuse of the network or the Internet to the system administrator or teacher. Misuse may exist in many forms and shall include, but not be limited to, any messages sent or received that are obscene, racist, defamatory, illegal, or otherwise in violation of school district policy.

All of the rules of conduct described in the Stamford Public Schools Acceptable Use Policy apply when I am using the Stamford Public School's network access to the Internet.

Student Name - Room #

Date

PARENT OR GUARDIAN AGREEMENT

As the parent or guardian of the above-named student, I have read the Stamford Public School's Acceptable Use Policy and understand that access to and utilization of the Stamford Public Schools' network for Internet access is designed for educational purposes. I understand that it is impossible for the Stamford Public Schools to restrict access to all controversial materials, and I will not hold the school district responsible for material acquired from the Internet. I also agree to report any known or suspected misuse of the network or the Internet to the school district system administrator. Misuse may exist in many forms and shall include, but not be limited to, messages sent or received that are obscene, racist, defamatory, illegal, or otherwise in violation of school district policy.

I accept full responsibility for supervision of my child when my child's use of a computer or access to the Internet is not in a school setting or on school property.

I hereby give permission for my child to use the Stamford Public School's network to access the Internet and to be issued a Stamford Public Schools account.

Parent or Guardian Name

Date