

**White Pine County School District
Responsible Use of Information Technology Resources
Acknowledgement and Consent Form: Grades 6 – 12**

The White Pine County School District believes that all students should have access to technology when they act in a responsible, courteous and legal manner. The District's IT resources offer students and staff a multitude of global information sources. Our goal in providing these resources is to enhance the educational development of our students. Responsible uses of IT resources are devoted to activities which support teaching and learning.

Student:

As a student of White Pine County School District, I have received, read and understand the Responsible Use of Information Technology Resources Policy Guidelines and this agreement. (Detailed information is located in WPCSD policy 7381 and 7382). I agree to comply with district technology policies. My parents/guardians have reviewed this Policy with me and I have asked them to explain anything I did not understand. I understand that I can ask a teacher or administrator for explanations if I have further questions at any time. I understand that if I violate this Policy, I am subject to the District's discipline and may be subject to the Internet Service Provider as well as local, state and/or federal legal action.

Signature of Student:	
Name of Student (PRINT):	
Date of Signature:	

Parent(s)/Guardian(s)

As the parent/guardian for the above student, I have received, read, and understand the Responsible Use of Information Technology Resources Policy (Policy No. 815) and this agreement. I understand that District IT resources are for educational purposes only. I have discussed this with the above student and we are in agreement that this is how s/he will use the IT resources provided by the District. I also understand that it is impossible to restrict access to all controversial materials and I will not hold the District responsible for materials acquired by the above student via the District's IT resources. I have discussed with the above student my expectations for what is appropriate to access and we are in agreement that is how s/he will use the IT resources provided by the District. I also agree to report any misuse of the District IT resources that may come to my attention. If either the above student or I have further questions, I will contact the building principal or Director of Technology. I hereby release the District, its personnel and any institutions with which the District is affiliated, from any and all claims and damages of any nature arising from my child's use of or inability to use District IT resources. My signature below gives permission for the District to issue the above student an account for accessing IT resources.

Signature of Parent/Guardian:	
Name of Parent/Guardian (PRINT):	
Date of Signature:	

Student's name: _____ **does not have permission to use his/her Personal Electronic**

Communication Devices while in school. Parent Signature: _____.