

DISTRICT ADMINISTRATORS

MICHAEL D. PAWLIK
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OFFICERS

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Board Secretary

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Treasurer

Acceptable Use Policy Authorization Form Parent or Guardian

As the parent or guardian of this student, I have read the Acceptable Use Policy and agree with its terms. I understand that this access is provided for educational purposes only and I have conveyed to this student the standards that they should follow when using any media and information sources.

I understand that it is impossible for the East Lycoming School District to restrict access to all controversial and inappropriate materials, and I will not hold the District responsible for materials acquired on the network and I release the District, employees and agents from any claims and damages arising from my child's use, or inability to use the Internet. I understand the District has the right to review any materials stored on any system provided or supported by the District and to edit or remove any material. I waive any right I may otherwise have in and to such materials.

I hereby give permission for my child to access the Internet as an academic resource under the supervision of a teacher or librarian and certify that the information contained on this form is correct. I understand that if my child's Chromebook device is lost or damaged beyond repair, I will be responsible to reimburse the district at the depreciated value of the device (not to exceed \$160). If the screen of the device is damaged and needs to be replaced, I understand I will be responsible for the repair (not to exceed \$30).

I understand that violations of the policy may have consequences ranging from censure to revocation of access privileges to suspension, expulsion, or restitution, and that these violations may be reported to local, state and or Federal legal authorities.

The East Lycoming School District Acceptable Use Policy is located at (<http://www.elsd.org>) under the start of year link. By signing this document, you are acknowledging that you have accessed, read and understand this policy. If you need or desire a paper copy of this policy, please request a printed copy, in writing, to your building principal.

Parent or Guardian (please print):

Student's Name (please print):

Grade: ____ Building: _____

Signature: _____

Date: ____/____/____