

SOUTH LEWIS CENTRAL SCHOOL  
STUDENT NETWORK AND INTERNET USE  
AUTHORIZATION FORM

**Students must complete and sign this section.**

Student Name (Print) \_\_\_\_\_

Current Grade \_\_\_\_\_ Building \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

I have read and fully understand the **Acceptable Use Policy** of South Lewis Central School and will abide by the terms and conditions set forth in the document. I further understand that any violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be taken.

I agree to never give out information about myself, family, friends, or school to unauthorized persons on the Internet. I will report to my teacher any contacts or materials that make me feel uncomfortable.

Student Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**A parent or guardian must also read the Acceptable Use Policy and sign this agreement.**

As the parent or guardian of this student, I have read the Acceptable Use Policy for network and Internet access. I understand that this access is designed for educational purposes. I also recognize it is impossible for South Lewis Central School to restrict access to all controversial materials, and I will not hold them responsible for materials acquired on the network. Further, I accept full responsibility to discuss appropriate use with my child.

Parent or Guardian (Print) \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

