Arcadia Valley R-II School District Technology Usage

Student User Agreement

I have read the Arcadia Valley R-II School District Technology Acceptable Use Policy and agree to abide by its 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, e-mail 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.

_____   _____

Student Signature   Date

_____   _____

Student Name (Print)   Graduation Year

Parent/Guardian Technology Agreement

I have read the Arcadia Valley R-II School District Technology Acceptable Use Policy. I understand that violation of these provisions may result in disciplinary action taken against my child, ward or child within my care, including but not limited to suspension or revocation of my child's or ward's access to district technology, and suspension or expulsion from school.

I understand that my child's or ward s technology usage is not private and that the school district will monitor my child's or ward s use of district technology, including but not limited to accessing browser logs, e-mail 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 my child's, ward's or child within my care's use of the district s technology resources. I agree to be responsible for any damages incurred by my child, ward or child within my care.

(Check one)
o   I give permission for my child or ward to utilize the school district s technology resources.
o   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 (Specify):

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

_____   _____

Parent/Guardian Signature   Date

_____

Parent/Guardian Name (Print)