COMPUTER NETWORK AGREEMENT FORM

I hereby apply fo	r a student/employee account on the	e District computer network:
Circle one:	Student: (grade level)	Employee: (building)
Name:	<u> </u>	
School:		
Home address:		
City, state, zip:		
Home phone:		
abide by all of the		d its guidelines and regulations and agree to use stated therein. I further state that all is truthful and accurate.
Signature:		Date:
	Parental Relea (for students under 18	
name) computer policy a confirm our child	's intentions to abide by the terms a	, the parent(s) of (student, have read and understand the nd we agree to its terms and conditions. We also agree to om home or outside of the classroom.
Signature:		Date:
(Approved 2/17	/2016)	