

**Abbeville County School District
TECHNOLOGY SYSTEMS ACCEPTABLE USE POLICY
Student Agreement Form**

I have read and understand and will have my child abide by the Abbeville County School District Technology Systems Acceptable Use Policy. I am aware that district technology, including the Internet and network access, is designed for educational purposes. I recognize that it is impossible for the district to restrict access to all controversial materials, and I will not hold the district responsible for materials accessed on the network. I further understand that the provisions of this policy are subordinate to local, state and federal statutes, and violations are unethical and may constitute a criminal offense. Should my child commit a violation, his/her access privileges may be revoked and he/she may be subject to other disciplinary actions prescribed by school policies or the law.

Student's name (please print) _____

Student's signature _____

Grade level _____ Homeroom teacher _____

Parent/Legal guardian's signature _____

Date _____