

Student Email Agreement

Student's Full Name (please print): _____

I have read (or it has been read to me), understand, and will abide by the TRCS *Acceptable Use Agreement*. I understand that should I commit any violation of this policy, my access privileges may be revoked, and school disciplinary action and/or appropriate legal action may be taken. I further understand that should I be issued an email account and/or other online tools, that I will use them appropriately and in accordance with this policy.

Student Signature: _____ Date: ____/____/____

Care of School Devices

- ❖ Do not do anything to the technology that will permanently alter it in any way.
- ❖ Do not eat or drink while using the devices or have food or drinks in close proximity to the devices.
- ❖ Do not place heavy materials, such as books, on top of your device or keyboard.
- ❖ **Do not share you passwords with anyone.**

PARENT OR GUARDIAN As the parent or guardian of this student, I have read the TRCS *Acceptable Use Agreement*. I understand that the use of the Internet and technology resources is a standard part of the instructional process and is considered the same as using a textbook or any other resource to enhance or deliver instruction. Furthermore, I understand that my child may be issued an email account, access to social learning networks, and/or given access to other specific online content in order to support the instructional process as is age and/or grade level appropriate. I further understand that access to the Internet and the use of school owned technology resources are intended for educational purposes only. I also recognize that even though TRCS uses appropriate Internet filtering software, it is impossible to restrict access to all inappropriate materials, and I will not hold the school responsible if my child accesses or acquires such material in the network. I accept responsibility for my child's compliance with the *Acceptable Use Policy*. I give my consent for school district personnel to monitor my child's school issued email account as well as my child's internet activity on school owned computers and the school network.

Parent or Guardian name (please print): _____

Signature: _____ Date: ____/____/____

The signed agreement must be returned to the school in order for your child to access school owned network resources. Please complete the following regarding student emails and return to school.

_____ **I DO** grant permission for my child to use the student email services provided by Two Rivers Community School.

_____ **I DO NOT** grant permission for my child to use the above services provided by Two Rivers Community School.

Student Signature: _____ Date: ____/____/____

Parent Signature: _____ Date: ____/____/____