

File: IIAD-E1

Student Application for Computer Network Access

For student users under the age of 18, Parts I, II, and III must be completed.

For student users age 18 or older, Parts I and II must be completed.

Student applications are not required if access is limited to teacher modeling Internet use.

Part I: Student

Student Name (Please Print): \_\_\_\_\_

I understand and will abide by The Acceptable Use Policy Agreement for the privilege of computer network access. I 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 and school disciplinary action and/or

Appropriate legal action may be taken.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Part II: Sponsoring Teacher

As the sponsor of this student, I have read The Acceptable Use Policy Agreement. I agree to instruct the student on acceptable use and proper etiquette and to monitor this student's use of the computer network while assigned to my program or course of study.

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Part III: Parent/Guardian (Required for student users under the age of 18)

As the parent/guardian of this student I have read the Acceptable Use Policy Agreement for the Elizabeth City-Pasquotank Public Schools. I understand that this access is designed for educational purposes and the schools are taking precautions to avoid material deemed harmful to minors . I also recognize that it is impossible for the schools to restrict access to all controversial materials, and I will not hold them responsible for materials available on the Internet. Further, I accept full responsibility if and when my child uses the Internet outside school. I give my permission to grant Internet access to my child.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Implemented: June 24, 2002

Elizabeth City-Pasquotank Public Schools, Elizabeth City, NC 27909