

STUDENT ACCEPTABLE USE AGREEMENT

STUDENT:

I have received and understand and will abide by the Meriden Public Schools Acceptable Use Policy. Should I commit any violation, my access privileges may be revoked and disciplinary or legal action may be taken, as appropriate.

Student (Full Name): _____

Student Signature: _____

Date:

PARENT/GUARDIAN:

As the parent/guardian of _____ (insert student name), I have read the Acceptable Use Policy. I understand that access to the district's computer systems is designed and allowed for educational purposes and understand that the Meriden Public Schools has taken precautions to eliminate controversial material. I also recognize, however, that it is impossible for the district to restrict access to all controversial or harmful materials and I will not hold the district responsible for any materials acquired on the network. Further, I accept full responsibility for supervision if and when my child's use of computer systems, including the Internet, does not occur in a school setting. I hereby give permission to issue an account for my child and certify that the information contained on this form is correct.

Parent or Guardian's Full Name: _____

Parent or Guardian's Signature: _____

Date:

Approved October 9, 2001
Amended March 23, 2004
Amended November 21, 2017

Previous Policy Number HH1.3R and 6141.3211-R