GOODHUE COUNTY EDUCATION DISTRICT
INTERNET USE AGREEMENT - STUDENT

STUDENT

I have read and do understand the education district policies relating to safety and acceptable use of the education district computer system and the Internet and agree to abide by them. I further understand that should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be taken.

User's Full Name (please print): _____

User Signature: _____

Date: _____

PARENT OR GUARDIAN

As the parent or guardian of this student, I have read the education district policies relating to safety and acceptable use of the education district computer system and the Internet. I understand that this access is designed for educational purposes. The education district has taken precautions to eliminate controversial material. However, I also recognize it is impossible for the education district to restrict access to all controversial materials and I will not hold the education district or its employees or agents responsible for materials acquired on the Internet. Further, I accept full responsibility for supervision if and when my child's use is not 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 Name (please print): _____

Parent or Guardian's Signature: _____

SUPERVISING TEACHER

(Must be signed if applicant is a student)

I have read the education district policies relating to safety and acceptable use of the education district computer system and the Internet and agree to promote these policies with the student. Because the student may use the Internet on the education district computer system for individual work or in the context of another class, I cannot be held responsible for the student's use of the Internet on the network. As the supervising teacher I do agree to instruct the student on acceptable use of the Internet and network and proper network etiquette.

Teacher's Name (please print): _____

Teacher's Signature: _____

INTERNET USE AGREEMENT - EMPLOYEE

EDUCATION DISTRICT EMPLOYEE

I have read and do understand the education district policies relating to safety and acceptable use of the education district computer system and the Internet and agree to abide by them. I further understand that should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be taken.

User's Full Name (please print): _____

User Signature: _____

Date: _____