



**STUDENT/PARENT TECHNOLOGY ACCEPTABLE USE
AGREEMENT FORM
GRADES K-3**

Student Name (print): _____

Building: _____ Grade: _____

Student Network/Internet User Agreement:

As a user of the Saline Area Schools computer network, please initial the appropriate items below:

_____ I agree to comply with the statements and expectations as outlined in the *Technology Acceptable Use and Safety Policy – Grades K-3* and to honor all relevant laws and restrictions.

_____ I grant permission to have my materials published to the World Wide Web.

Student Signature: _____ Date: _____

Teacher: _____

Parent/Guardian Permission:

All students are provided with access to district computer resources. In addition to accessing our district computer network, as the parent or legal guardian, I grant permission for the above named student to participate in the following activities. *(Please initial the items that you will allow your child to participate in.)*

_____ My child can access the Internet.

_____ My child can have his/her materials published to the World Wide Web.

Parent/Guardian Name (print): _____

Parent/Guardian Signature: _____ Date: _____

Revised: 8/10