

Arlington Public Schools
Addition to Student Handbook

ACCEPTABLE USE OF COMPUTERS AND NETWORKS

STUDENT'S AGREEMENT

In order to make sure that all members of Arlington Public School community understand and agree to these rules of conduct, Arlington Public Schools asks that you as a student user sign the following statement:

I have received a copy of, and have read, the Internet Safety and Acceptable Use Policy adopted by the Arlington Public Schools, and I understand and will abide by those district guidelines and conditions for the use of the facilities of Arlington Public Schools and access to the Internet. I further understand that any violation of the district guidelines is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges will be revoked. School disciplinary action and/or appropriate legal action will be taken.

I agree not to hold the Arlington Public Schools, any of its employees, or any institution providing network access to Arlington Public Schools responsible for the performance of the system or the content of any material accessed through it.

Student's Name _____

Student's Signature _____ Date: _____

PARENT'S AGREEMENT

In order to make sure that all members of Arlington Public Schools community understand and agree to these rules of conduct, we ask that you as a parent/guardian sign the following statement:

I have received a copy of, and have read, the Internet Safety and Acceptable Use Policy adopted by Arlington Public Schools. As parent or guardian of the student named below, I grant permission for my son or daughter to access networked computer services such as electronic mail (e-mail) and the Internet. I understand that this free access is designed for educational purposes. I also understand that individuals may be held liable for violations of those Terms and Conditions. However, I also recognize that it is impossible to restrict access to all controversial materials and I will not hold Arlington Public Schools responsible for materials acquired or sent via the network.

I agree not to hold the Arlington Public Schools, any of its employees, or any institution providing network access to Arlington Public Schools responsible for the performance of the system or the content of any material accessed through it.

Student's Name _____

Parent's Signature _____ Date: _____

This form will be retained on file by authorized
faculty designee for duration of applicable
computer/network/Internet use.