



**STUDENT/PARENT TECHNOLOGY ACCEPTABLE USE  
AGREEMENT FORM  
GRADES K-4**

Student Name (print): \_\_\_\_\_

Building: \_\_\_\_\_ Grade: \_\_\_\_\_

**Student Network/Internet User Agreement:**

As a user of the Saline Area Schools computer network, I hereby agree to comply with the statements and expectations as outlined in the *Technology Acceptable Use and Safety Policy – Grades K-4* document and to honor all relevant laws and restrictions. *(Please initial the appropriate items below.)*

\_\_\_\_\_ I agree to use the network responsibly.

\_\_\_\_\_ 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. *(Please initial the appropriate items below.)*

\_\_\_\_\_ 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: 8/09