



WHITE BEAR LAKE AREA SCHOOLS

Electronic Technologies Acceptable Use Agreement - Student

By signing this agreement, I accept and agree to abide by the White Bear Lake Area Schools Electronic Technologies Acceptable Use Policy¹. I realize that the primary purpose of using School District electronic technologies is educational. I will limit my usage to educational purposes that further goals consistent with the mission and policies of the School District.

I understand that use of School District electronic technologies is a privilege, not a right. Access may be revoked at any time by the School District, as it sees fit. Inappropriate use will result in suspension or cancellation of use and/or access privileges; payments for damages and repairs; discipline under other appropriate School District policies, including suspension, expulsion, exclusion, or termination of employment; or civil or criminal liability under other applicable laws.

I will not use School District electronic technologies to engage in any behavior that is illegal, inappropriate, destructive or harmful.

I recognize that, even though the School District uses technical means to limit student Internet access, these limits do not provide a foolproof means to prevent access to all inappropriate information. It is my responsibility to avoid such information and inform my instructor immediately if I access any inappropriate information.

I understand that my use of School District electronic technologies is not private and that all of my activity, transmissions, documents, posts etc., are subject to review and monitoring by School District personnel.

I release the School District from any liability resulting from actions I take while using School District electronic technologies including unwanted financial obligations.

The School District may provide personal accounts for communication, document sharing and access to educational tools. Any access I am granted to personal accounts through the School District must meet all of these criteria, or my privilege of use will be forfeited.

STUDENT

Student's Full Name (Please Print): _____ Student ID: _____

Student's Signature: _____ Date: _____

PARENT OR GUARDIAN

Parent or Guardian's Name (Please Print): _____

Parent or Guardian's Signature: _____

¹ View the Electronic Technologies Acceptable Use Policy at: <http://goo.gl/SUghlf>