

Student Acceptable Use of District Information Technology Agreement (AUA)

Directions: After carefully reviewing Douglas County School District Policy JICJ and Regulation JICJ-R, *Student Use of Information Technology*, and any other materials that are attached to this Agreement, please read and fill out the appropriate portions of this Agreement and return it to your school. *No student will be permitted to use any District information technology (such as computer access) until this form is properly filled out and turned in.*

Parent or Guardian (If the student is less than 18 years old, then a parent or guardian must read and sign this Agreement)

As the parent or guardian of this student I have read and agree to follow the District's rules regarding appropriate use of its information technology ("IT"). I have discussed these rules with my child and believe he or she understands them. I also recognize that it is impossible for the District to completely control information that is available to students electronically and will not hold the school, the District, or any of its employees responsible for materials my child may acquire through District IT. I understand that neither I nor my child has any expectation of privacy in electronic communications made or received using District IT, and that the District has the right to inspect, retain, and, if appropriate, disclose any information sent or received through its IT system. I understand that this includes materials and records of use that have been "deleted." I also recognize that if my child uses District IT inappropriately, his or her access to such resources may be restricted or revoked, I may be required to reimburse the District for unauthorized charges or costs, and such inappropriate use may result in other disciplinary consequences for my student, up to and including expulsion and/or legal action. With this understanding, and in consideration of the benefits access to District's IT provides, I give permission for my child to use District IT in accordance with District policies and school or class rules.

Student Name (please print)

Date of Birth

School of Attendance and Grade Level

Parent or Guardian Name (please print)

Signature of Parent or Guardian

Date

Student (grade 7 and above)

I have read and agree to follow the District's rules regarding appropriate use of District information technology ("IT"). I have discussed these rules with my parent or guardian, have asked a teacher or other school official any questions I might have about these rules, and understand these rules. Because of the benefits access to District IT provides, I agree to follow these rules and to limit my use of District IT to school-related communications (such as communicating about homework or class projects) and things directly related to further education (such as getting or learning about a job or community-service activities). I understand that if I do not follow the rules, I may lose the privilege of using these resources and may have other disciplinary action taken against me.

Student Name (please print)

Student Signature

Date