FORM **11**

Reynoldsburg City Schools

Technology Acceptable Use Agreement Students/Parents/Guardians

All Board policies are available in each school's administrative office and on reyn.org.

I have read, understand and agree to abide by the Computer Technology Acceptable Use Policy. I agree to report any violation of this policy to the building principal or IT Department and to cooperate in any investigations regarding violations. I understand that my technology account may be monitored. I agree to exercise responsibility by using my best efforts not to violate this policy.

I understand that any violation of this Policy may subject me to restriction or termination of my access to district technology, discipline in accordance with the student handbook, other Board policies, referral to legal authorities, and/or other legal action.

| By signing below, I agree to release The Reynoldsburg City School District Board of Education, its staff an | d Board |
|---|----------|
| members, from any claims or damages arising as a result of or in connection with my use of District technic | ology or |
| the District's network, including claims or damages arising from the use of same by someone to whom I hav | ∕e given |
| my user name or password. | |
| | |

| Student Name (clearly printed) | Student Signature | Date |
|--------------------------------|-------------------|------|

If the student named above is under 18 years of age, a parent or legal guardian must complete the following:

PARENT/GUARDIAN PERMISSION FORM

I have read and understand the District's Computer and Technology Acceptable Use Policy, and agree to its terms. As a parent or legal guardian of the minor student signing above, I grant permission for my daughter/son/ward to access District technology resources, including networked computer services such as the Internet. I understand that some accessible materials may be objectionable, and I accept responsibility for setting and conveying standards for my daughter/son/ward to follow when selecting, sharing, or exploring information and media.

By signing below, I agree to release The Reynoldsburg City School District Board of Education, its staff and Board members, from any claims or damages arising as a result of or in connection with my child's/ward's use of the Network or District technology, including claims or damages arising from my child giving his/her user name or password to another person. I am aware of and agree to the \$25.00 annual charge to cover the administration of devices (this only applies to devices assigned to be taken home by students), and a \$15.00 deductible per incident if the device is non-intentionally damaged.

| Parent/Guardian Signature | Date | |
|---------------------------|-----------------------|--|
| Home Phone # | Student ID# | |
| Work Phone # | Student Date of Birth | |
| | | |