

ELECTRONIC INFORMATION NETWORKS INDIVIDUAL USER ACCESS INFORMED CONSENT

My child/I agree to abide by the District's Policy and Procedures for Electronic Information Systems, which I/we have reviewed and understand. I/we acknowledge that failure to comply with the policy and procedures may result in the revocation of network use privileges. My child/I acknowledge and agree that _____ Aberdeen School District 5 _____ has the right to review, edit or remove any materials installed, used, stored, or distributed on or through the network or District's system. I/we hereby waive any right of privacy which my child/I may otherwise have to such material. I/We have also been presented with opportunities to learn more about the Internet and electronic networks in schools.

APPLICANT	PARENT/GUARDIAN
_____ Printed Name of Applicant <input type="checkbox"/> Staff <input type="checkbox"/> Student Student No. _____ _____ Signature of Applicant _____ School Name or Location of Applicant _____ Date Signed	_____ Printed Name of Parent or Guardian (Required if applicant is under age 18) _____ Signature of Parent or Guardian _____ Date Signed

For Official Use Only	
This form should be kept at the school in the student's cumulative folder or on file with the building coordinator.	
_____ Signature of Building Coordinator	_____ Date