

The School District of Lee County
STUDENT NETWORK USE AGREEMENT
The Terms and Conditions for Network Use and the Agreement were

Developed under Board Policy 2.44, Use and management of

STUDENT RESPONSIBILITY AGREEMENT

I, _____, student at LEHIGH SENIOR HIGH SCHOOL, am making a request for school network access privileges. I have read and understand the three page Lee County Schools Student Network Use Agreement and I understand and agree to abide by the duties and responsibilities that go with my access to and that this privilege may be revoked at any time if I make inappropriate use of the network or fail to comply with the terms of the School District of Lee County Student Network Use Agreement.

STUDENT'S SIGNATURE

DATE

PARENT/GUARDIAN NETWORK ACCESS W/PERMISSION

As a parent or legal guardian of _____, the above named students, I have read the terms and conditions of the three page of the School District of Lee County Student Network Use Agreement. I understand that this network access is designed and intended for educational purposes; however, I recognize that it is impossible for the School District of Lee County, Florida, to restrict access to all controversial materials and I therefore agree not to hold it responsible for any materials acquired on this network. I further understand that my child's access to this network is a privilege that may be revoked at any time by the school.

PARENT/LEGAL GUARDIAN'S SIGNATURE

DATE

TEACHER VERIFICATION

My signature verifies that the above named student has been instructed in all of the duties and responsibilities necessary for proper network access and the student has demonstrated to me an understanding of those responsibilities as described in the Terms and Conditions for Network Use.

TEACHER'S SIGNATURE

DATE