

LINDEN PUBLIC SCHOOLS
ACCEPTABLE USE OF COMPUTER, NETWORKS and THE INTERNET

Student Agreement Form
(Please detach and return to school)

Please print:

Name of Student: _____ Date of Birth: _____

School: _____ Grade: _____ Home Room: _____

The purpose of the *Acceptable Use of the Internet Policy* is to support the Linden Public Schools commitment of providing avenues of access to the universe of information available. The district's system of electronic communication shall include access to the Internet all for students and staff.

To view the *Acceptable Use of the Internet Policy* go to the Linden Public Schools website:

www.linden.k12.nj.us – (click on **Quick Links**)

If you do not have access to this policy on-line, please contact your school's office.

I have read and agree to **Policy No. 6142.10, "Acceptable Use of the Internet"** and, as a parent/legal guardian of the minor student listed above, grant permission for my child to access networked computer services such as the Internet. I understand that individuals may be held liable for violations. I understand that as a parent or guardian, I may be held responsible for violations by my child. I understand that some sites on the Internet may be objectionable, but am aware that the Linden Public School District has attempted to provide safety precautions to protect my child from these objectionable sites.

I understand that if I want to revoke this permission, I need to send a written request to the principal of my child's school.

Parent/Guardian Signature: _____ Date: _____

Home Address: _____

Telephone #'s: (Home) _____ (Cell) _____

As a user of the Linden Public Schools computer network, I have read and hereby agree to comply with the above-stated rules entitled "Acceptable Use Policy for the Internet."

Student Signature: _____ Date: _____

I hereby give permission for my child's work, which may or may not be accompanied by the child's first name and/or photograph, to be electronically displayed and reproduced by the school district, and hereby release the Linden Public School District from any liability resulting from or connected with the publication of such work.

Parent/Guardian Signature: _____ Date: _____