



Student Name _____ Student ID _____ Grade _____ Date of Birth _____

Agreement to Information Network Acceptable Use Policy

I have read [District Policy AA445-Student Information Network Acceptable Use Policy](#) and agree to abide by its terms and conditions. I understand that violation of the use provisions stated in the policy may result in limitation, suspension or revocation of network privileges and/or other disciplinary action by the school, Jordan School District, or by legal authorities.

✓ Student Signature _____ Date _____

As a parent or legal guardian of this student, I have read and discussed with my child [District Policy AA445- Student Information Network Acceptable Use Policy](#). I understand that this access is designed for educational purposes. I also recognize that access to all controversial materials on a worldwide network cannot be controlled and I will not hold the district responsible for materials acquired on the network. I hereby give my permission for access to electronic information resources for my child.

✓ Parent/Guardian Signature _____ Date _____