

Acceptable Technology Use Procedures Acknowledgement

This form must be signed by the child and each parent/guardian.

As the parent(s)/guardian(s) of _____, we have read and discussed the Acceptable Technology Use Procedures with our child. We understand the rights/responsibilities and guidelines outlined within and understand that it is our responsibility to convey to our child the importance of using the technology resources responsibly. We also agree to abide and support these rules including our use of the Infinite Campus Parent/Guardian Portal. Boone County Schools' network communications are not private, and may be viewed by Boone County School personnel, or by someone appointed by them, to ensure that all guidelines are followed. Violation of the terms listed in the ATUP will result in a loss of access to the Boone County Schools' network and may result in other disciplinary action under the guidelines of the Boone County Schools Code of Conduct Book.

____ Yes ____ No

Boone County Schools has permission to photograph our child and/or include our child in video for educational purposes.

Parent/ Guardian #1 Printed Name

Parent/ Guardian #1 Signature

Date

Parent/ Guardian #2 Printed Name

Parent/Guardian #2 Signature

Date

I understand the rights/responsibilities and guidelines outlined within and understand that it is my responsibility to use the technology resources responsibly.

Student Printed Name

Student Signature

Date