



**St. Louis Public Schools**  
**TECHNOLOGY USAGE AGREEMENT**  
**School Year: 2023-2024**

I have read the St. Louis Public School District Technology Usage Policy, administrative regulation, and guidelines and agree to abide by their provisions. I understand that violation of these provisions may result in disciplinary action taken against me, including but not limited to suspension or revocation of my access to district technology, and suspension or expulsion from school.

I understand that my use of the District's technology is not private and that the school district may monitor my use of district technology, including but not limited to accessing browser logs, e-mail logs, and any other history of use. I consent to teacher-monitoring of my activities on the District network or the Internet. I consent to district interception of or access to all communications I send, receive or store using the District's technology resources, pursuant to state and federal law.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name (print clearly)

Home Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Printed Name: \_\_\_\_\_

\_\_\_\_\_  
Date