

Parents,

Signature of Parent/Guardian

## St. Louis Public Schools

## TECHNOLOGY USAGE District network/internet

## Access and Assignment of e-mail Account

Please review the agreement below with your child(ren):			
Student Agreement			
I have read the St. Louis Public Schools District Technology Usage Policy, administrative regulations, 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.			
		_	of my activities on the District network or the internet. I consent to to all communications I send, receive or store using the District's to state and federal law.
		Signature of Student	Date
Print Name (print clearly)			
Home Address			
Home Phone Number:			

Date