

Wilson County Schools
Student Acceptable Use Agreement

Student:

I have read (or it has been read to me), understand, and will abide by the Wilson County Schools' guidelines regarding district technology resource use (policy: 3225/4312/7320 Technology Responsible Use). Should I commit any violation, my access privileges may be revoked, and school disciplinary action and/or appropriate legal action may be taken.

Student's Name (please print): _____

Signature: _____

Date: _____

Parent or Guardian:

As the parent or guardian of this student, I have read the above-referenced guidelines regarding district technology resource use. I understand that network/Internet access is intended for educational purposes. The Wilson County Schools have taken precautions to restrict my child's access to questionable materials. However, I recognize that it is impossible for the Wilson County Schools to restrict access to all questionable materials, and I will not hold the school system responsible if my child accesses or acquires such materials on the network. Further, I accept full responsibility for any costs that my child may incur when using the Internet outside of class time. I hereby give permission for my child to use network resources provided by the Wilson County Schools.

Parent or Guardian's Name (please print):

Signature: _____

Date: _____

A signed agreement must be returned to your child's school in order for your child to access network resources.

[Policy Code: 3225/4312/7320 Technology Responsible Use](#)