

**MUSCOGEE COUNTY SCHOOL DISTRICT**  
**Acceptable Use Policy (AUP) Agreement Form for**  
**Standards for Acceptable Use as Defined in MCSD Technology Plan, Appendix B**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name \_\_\_\_\_

For School Year: \_\_\_\_\_ Student # (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/Guardian Consent for Students Under Age 18**

As the parent or guardian of this student, I have read Appendix B of the Board-approved MCSD Technology Plan (the MCSD Standards for Acceptable use of the Network and Internet), which is posted on the MCSD website at [http://www.mcsdga.net/inside/technology/techplan/techplan06\\_appb\\_aupform\\_rev\\_07\\_05.pdf](http://www.mcsdga.net/inside/technology/techplan/techplan06_appb_aupform_rev_07_05.pdf). I understand that access to the Network and Internet is designed for educational purposes and that my student's school and MCSD have taken precautions to control controversial material; however, I also recognize it is impossible to restrict access to all such materials, and I will not hold the school or MCSD responsible for materials acquired, viewed, or transmitted on the Network or Internet. Further, I accept full responsibility for supervision of my student's Internet access when s/he is not in a school setting. I understand that any violation may revoke his/her access privileges or invoke disciplinary action and/or appropriate legal action. I also agree to abide by any changes in the AUP as approved by the Board.

I grant permission for my student to use the Network and Internet, including Web 2.0.  
 Yes  No

I grant permission for my student to use an email account at school for instructional purposes only.  
 Yes  No

I grant permission for my student's information to be released to local news agencies for publication concerning school events.  
 Yes  No

I grant permission for publication of any work of my student.  
 Yes  No

As the parent or guardian of this student, I understand that any school and/or district Internet publication involving my student will be reviewed by the principal or designee to insure consistency with any Board policies.

I grant permission for my student's name to be published on the school and/or district website.  
 Yes  No

I grant permission for my student's photograph to be published on the school and/or district website.  
 Yes  No

\_\_\_\_\_  
 Parent/Guardian Name (Please Print)

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

\_\_\_\_\_  
 Date

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

\_\_\_\_\_  
 Date

**Agreement for Using the Internet:  
 Students at Least 18 Years of Age  
 or Adults (Non-Employees)  
 Using School Equipment**

As a user of the Network or Internet, I hereby agree to comply with this AUP and any Board-approved changes for the MCSD Network or Internet. I will use the Network and Internet in a responsible fashion while honoring all rules, policies, and restrictions. I understand that any violation may revoke my access privileges or invoke disciplinary action and/or appropriate legal action.

Yes  No

I grant permission for publication of any of my work on the school and/or district website.  
 Yes  No

I grant permission for my name to be published on the school and/or district website.  
 Yes  No

I grant permission for my photograph published on the school and/or district website.  
 Yes  No

I grant permission for my information to be released to local news agencies for publication concerning school/district events.  
 Yes  No

I understand that any e-mail account that I use on school district property will be used for instructional purposes only.  
 Yes  No

\_\_\_\_\_  
 Student/Adult Signature

\_\_\_\_\_  
 Date



## **Required Netbook User Agreement 2011-2012**

**STUDENT:** I understand and will abide by the Muscogee County School District Acceptable Use Policy for internet use. I further understand that any violation of the regulations outlined is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, school disciplinary action and/or appropriate legal action will be taken.

Student's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PARENT/GUARDIAN:** *As the parent or guardian of this student, I have read the Acceptable Use Agreement (AUP) for internet use and signed the Acceptable Use Agreement Form. I understand that this internet access is designed for educational purposes. Muscogee County School District has purchased internet filtering software to comply with CIPA (Child Internet Protection Act) regulations. I recognize it is impossible for Muscogee County School District to restrict access to all controversial materials and I will not hold them responsible for materials acquired on the netbook. Further, I accept full responsibility for supervision when my child's netbook is used outside a school setting. I certify that the information contained on this form is correct.*

Parent or Guardian's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**BOTH STUDENT & PARENT/GUARDIAN:** In cases of theft, vandalism and other criminal acts, I will immediately report the incident to the principal. **INTENTIONAL DAMAGE WILL RESULT IN DISCIPLINARY ACTION.**

Student Name (Please Print): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ***Student Pledge for Netbook Use:***

1. I will know where my netbook is at all times and I will never leave the netbook unattended.
2. I will never loan out my netbook to other individuals.
3. I will charge my netbook's battery daily.
4. I will keep food and beverages away from my netbook since they may cause damage to the computer.
5. I will not disassemble any part of my netbook or attempt any repairs.
6. I will use my netbook in ways that are appropriate and educational.
7. I will not place decorations (such as stickers, markers, etc.) on the District netbook.
8. I understand that my netbook is subject to inspection at any time without notice.
9. I will follow the policies as outlined in the Netbook Policy and Procedures.
10. I will immediately report theft, loss, or vandalism to the principal.
11. I agree to return the netbook, power cords, and messenger bag in good working condition at the end of the current school year or if/when I leave Carver High School for any reason (ie, transferring to another MCSD school, or moving out of Muscogee County School District).

Student Name (Please Print): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Georgia Department of Education  
Student Consent Form  
2011-2012

Dear Parents:

Our school has been selected to serve as a model for instruction to teachers in the state of Georgia because of our involvement in the Title IID competitive grant. The Georgia Department of Education is requesting that digital media, i.e. video, photographs, etc be captured of students working in a classroom that is benefiting from a Title IID competitive grant.

The Technology Services Office of the Georgia Department of Education will be developing courses for teachers relating to the highly effective use of technology tools or resources towards instructional strands that foster increased student achievement. The digital media captured from your school/classroom may be used in teacher training initiatives as well as documentation as to the effect of the Title IID grant activities.

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For valuable consideration, I give permission for my minor child to be photographed, videotaped, and interviewed for stories, articles or documentaries that may be produced to promote our school, the school system, and the Georgia Department of Education as it relates to promoting education technology throughout the state of Georgia. I understand that **only** my child's first name will be used in relation to this project and any photographs or videotaping that may occur.

I consent to release the right and permission to copyright, publish or republish, and use in all forms and media and manners for advertising, trade, promotion, exhibition, or any other lawful purpose in connection with professional development for teachers throughout the state of Georgia.

Date: \_\_\_\_\_

Minor's Name: \_\_\_\_\_ (print)

Parent or Guardian: \_\_\_\_\_ (signature)

Parent or Guardian: \_\_\_\_\_ (printed name)