

**Authorization for Internet Access**

STUDENT NAME: \_\_\_\_\_ I.D. NUMBER: \_\_\_\_\_  
PLEASE *PRINT* NAME

I understand and will abide by the above authorization for Electronic Network Access. I understand that the District and/or its agents may access and monitor my use of the Internet, including by e-mail and download material, without prior notice to me. I further understand that should I commit any violation, my access privileges may be revoked, and school disciplinary action and/or appropriate legal action may be taken. In consideration for using the District's Electronic Network connection and having access to public networks. I hereby release the School District and its Board members, employees, and agents from any claims and damages arising from my use, or inability to use the Internet

DATE: \_\_\_\_\_ USER SIGNATURE: \_\_\_\_\_

***(Required if the user is a student)***

I have read this Authorization for Electronic Network Access. I understand that access is designed for educational purposes and that the District has taken precautions to eliminate controversial material. However, I also recognize it is impossible for the District to restrict access to all controversial and inappropriate materials. I will hold harmless the District, its employees, agents, or Board members, for any harm caused by materials or software obtained via the Network. I accept full responsibility for supervision if and when my child's use is not in a school setting. I have discussed the Authorization with my child. I hereby request that my child be allowed access to the District's Internet

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
*PRINT* PARENT/GUARDIAN NAME

**OVER** 

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PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
*PRINT* PARENT/GUARDIAN NAME

**OVER** 

**Authorization for Using a Photograph or Videotape of a Student**

I grant consent to Belleville Township High School District 201 to identify a picture of my child or ward, by full name and/or the school he or she attends, in any school-sponsored material, publication, videotape, or website. This consent is valid for the entire time my child or ward is enrolled in Belleville Township High School District 201. I may revoke this consent at any time by notifying the Building Principal in writing.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
***PRINT*** PARENT/GUARDIAN NAME

\_\_\_\_\_  
***PRINT*** CHILD OR WARD'S NAME

Pictures of students taken by non-school agencies: While the school limits access to school buildings by outside photographers, it has no control over news media or other entities that may publish a picture of a named or unnamed student. School staff members will not, however, identify a student for an outside photographer.

**OVER** 

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PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

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***PRINT*** PARENT/GUARDIAN NAME

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**OVER** 