

Technology and Communication Services Access Authorization and Release Agreement Form for Students



8094 Plantation Drive
West Chester, OH 45069
P: 513-755-0169
F: 513-755-0179
www.intlacademy.org

I _____ (name of user), as a condition of utilizing technology and communication services, including but not limited to the El-Sewedy International Academy of Cincinnati (Academy) networks and the Internet, understand the use of and access to networks. The use of any network, including the Internet, is a privilege and I agree to the following:

1. I have read, understand, and agree to comply with the Academy's Technology and Communication Services Policy and Regulations, as found on the Academy website (www.intlacademy.org). I also understand that any violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked and/or disciplinary action taken.
2. I understand and agree that all information and services accessed on the Internet within the Academy are through approved Internet providers and are intended for educational purposes only.
3. I understand and agree that I have no expectation of privacy in my use of the technology and communication services of the Academy.

Please print the following information:

User Name: _____ Birthdate: _____

Teacher: _____ Grade: _____

Student Signature: _____ Date: _____

Parental Authorization and Release/Agreement for Technology Communication Services Access

As the parent or guardian of this student, I/we have read and understand the Academy's Technology and Communication Services Policy and Regulations, as found on the Academy website (www.intlacademy.org), and agree to their terms and conditions. I/we confirm my/our child's intentions to abide by the terms and conditions therein, and I/we agree to supervise my/our child's use of the Academy's computer network from home or outside the classroom. Furthermore, I/we recognize that the Board is under legal obligation to protect the personally identifiable information of students. Therefore, as the parent/guardian of this student, I understand and agree that emails containing identifiable student information sent to the email address I provide to the school should not be share with others.

Student's Name: _____

Parent/Guardian Signature Date

I/We also agree to allow the publication of our child's first name, work, and/or photos on the Academy's computer network, including the website/web pages.

Parent/Guardian Signature Date