

Attachment A

Student Network Account Agreement

I, _____ *[Print Name]*, agree to adhere to the District's Internet and Technology Acceptable Use Policy. I agree to abide by all terms, conditions, and restrictions set forth within the Policy.

I understand if I violate the rules, my account may be suspended or terminated, and I may be disciplined in accordance with the District Code of Conduct. Additionally, I may be referred to law enforcement agencies. I am held fully responsible for all of my actions when I use the DCS, or any District technology and devices.

Name of Student: _____

Signature of Student: _____

Date: _____

Grade: _____

School (Please circle) Mooers Elementary Rouses Point Elementary Middle High

Attachment B

PARENT/GUARDIAN AGREEMENT

I, the parent/guardian of _____, understand that even though my child's school is providing supervision and guidance during the student's use of the DCS, District-owned laptops, and/or other technology, complete blockage of all unauthorized material is not guaranteed, and I will not hold the District responsible for the student's access to unauthorized material or inappropriate use of the DCS, a District laptop, and/or other technology. I further agree to indemnify and hold harmless Northeastern Clinton Central School District for any liability which it may incur as a result of my children's unauthorized or improper use of the DCS, a District laptop, and/or other technology. By signing here, I agree to the terms of the District's Internet and Technology Acceptable Use Policy.

Signature of Parent/Guardian _____

Parent/Guardian Name (Printed) _____

Name of Student _____

Date _____

Grade: _____

School (Please circle) Mooers Elementary Rouses Point Elementary Middle High

Attachment C

STUDENT OPT-OUT FORM

Revoking District Network and Technology Access

Students are automatically opted-in to the District's Network and Technology Program (the "Program") starting the first day of school. As a parent/guardian, you have the option to remove them from this Program and revoke authorization. The Parent and/or Guardian should be aware that by requesting and completing this Opt-Out form, your child will be denied access to the District's network resources including email, online learning resources, classroom collaborative activities and assessments, any electronic instructional classroom models, District software, surveys and assessments, and NYSED State Examinations.

I, _____ *[Name of Parent/Guardian]*, understand the potential detrimental educational consequences of removing my child, _____ *[Name of Student]*, from the Program and have chosen to revoke authorization. As a result of this revocation, my child will not have access to District technology, including, but not limited to, internet network access and/or the use of computers and/or other technology devices.

This Opt-Out Form will be in effect for the current school year. If you do not provide our District with this form, it is assumed that you agree that your child will optin agreeing to our District's Internet and Technology Acceptable Use Policy

Student Name: (Please Print clearly) _____

Grade: _____

School (Please circle) Mooers Elementary Rouses Point Elementary Middle High

I hereby release the District from any and all claims and damages of any nature arising from my child's use or inability to use the District's internet and technology, including, but not limited to claims that may arise from the unauthorized use of our District's network.

Parent/Legal Guardian Name (Please Print clearly) _____

Parent / Legal Guardian Signature _____

Date: _____

Home Address _____

(Please include address, city, state, and zip)

Phone Number _____

Attachment D

MEDIA RELEASE FORM

(Provided with District Policy 5500-E1 Annually)

The **Media Release Form** will give the District permission to allow your child to be featured in promotional, instructional and educational publications, posters, brochures, pamphlets, newsletters, newspapers, yearbook, and on District web sites. Select only **ONE** of the permission check boxes on this form. **If you select the last option, "I do not give permission..."**, please note that your child's photo **will not** appear in their building yearbook as well as all other above mentioned District resources.

The Northeastern Clinton Central School District requests permission to allow your child's photo or likeness, voice, and/or work to be used for any items published, distributed, or released by the District including but not limited to the following purposes: **promotional, instructional and educational publications, posters, brochures, pamphlets, newsletters, yearbooks, District and Media web sites, radio, and television broadcasts.**

You may request that this material not be published, distributed, or released without this prior written consent in compliance with the Federal Trade Commission's Children's Online Privacy Protection Rule (COPPA), 16 CFR Part 312. In order that the District may be aware of your preferences, we ask that you sign and return this form.

This release form will be kept on file with the District. This release form covers only materials directly published, distributed, or released by the District. Consequently, the District is not responsible for any other occurrences outside of its control.

This form must be completed, signed, and returned on a yearly basis. If desired, you may submit an updated request at any time during the year. However, no claim shall be made by the District that any pre-existing material will be destroyed, deleted, or removed from the preceding stated purposes.

Please complete the information below and return this form to your homeroom teacher.

Please check only ONE item. (Please read the first paragraph carefully prior to selecting a checkbox)

- I **give permission** for my child's photo or likeness, voice, and/or work to be used for **any and all purposes** listed above.
- I **give permission** for my child's photo or likeness to be used for all purposes listed above **except** the District web site.
- I **do not give permission** for my child's photo or likeness, voice, and/or work to be used for **any purposes** listed above, including, but not limited to, each school building's yearbook.

Circle the school/building where your child attends:

Mooers Rouses Point Middle School High School District

Student Name: _____ (PLEASE PRINT CLEARLY)

Parent Name: _____

Parent Signature: _____

Date: _____