

Tunkhannock Area School District

Tunkhannock PA 18657

Phone (570) 836-3111

INTERNET AND COMPUTER ACCESS PERMISSION FORM

STUDENT NAME _____ DATE _____
(Please Print)

I have read and understand The Conditions and Rules for Use of the Internet and Computers mandated by the Tunkhannock Area School District and posted at all user sites. I agree to the conditions and rules as stated. I understand that failure to observe any of the rules and conditions may result in the suspension of privileges to use the Internet and/or computers.

I give permission for the above named student to access the Internet and use computers. I understand that there cannot be constant monitoring by school authorities. I also understand that while on the Internet, it is possible for my child to encounter, purposely or accidentally, material that may be considered by some to be objectionable.

(Signature of Parent/Guardian)

I, the above named student, have read and understand the Conditions and Rules for the Use of the Internet and Computers mandated by the Tunkhannock Area School District and posted at all user sites. I agree to the conditions and rules as stated. I understand that failure to observe any of these rules and conditions may result in the suspension of privileges to use the Internet and computers, as well as other repercussions.

(Signature of Student)

HOMEROOM _____ BUILDING _____

RETURN FRONT SHEET
PLEASE KEEP AND REFER TO SECOND SHEET