

Thief River Falls Public Schools

1:1 Program Policies & User Guide Student and Parent Agreement

Access to the technology in the Thief River Falls School District is a privilege and has been established for educational purposes. The use of the Thief River Falls School District’s electronic technologies is a valued resource to our school district and community. All electronic technologies must be used in support of the educational program of the District. This access may be revoked at any time for abusive or inappropriate conduct related to the use of electronic technologies.

Failure to comply with the District’s Bullying Prohibition Policy (#514), Internet and Acceptable Use Policy (#524), or the guidelines stated in the 1:1 Program User Guide for the care and use of district issued Device (MacBookAir, iPad or iPad Mini) may result in the loss of privilege to take the Device home or use the Device in general.

The Device is the property of Thief River Falls Public Schools and as a result may be seized and reviewed at any time. The student should have NO expectation of privacy of materials found on the Device.

I have read all the policies and guidelines in the Thief River Falls Public Schools 1:1 Program User Guide document and understand my responsibilities as a student in the 1:1 Program:

Student Name: _____

Student Signature: _____

Grade: _____ School: _____

Date: _____

I/we have read all the policies and guidelines in the Thief River Falls Public Schools 1:1 Program User Guide document and understand my/our responsibilities as a parent in the 1:1 Program:

I/we grant my child permission to have access to the Internet using the District’s technology resources. I also understand that some material accessible through the Internet may be inappropriate for school-aged children. I agree to defend, indemnify and hold harmless the District from any and all claims arising out of or related to the usage of the District’s technology resources, including access to the Internet. I further understand that I have the right to withdraw my approval at any time.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Grade: _____ School: _____

Date: _____