

NETWORK USE PERMISSION FORM
(Please refer to the Endeavour Learning Trust Acceptable Use Policy)

Please complete and return this form to the Network Manager and retain the policy documentation

I have read and understood the Acceptable Use Policy and as a school or Trust computer user, I agree to comply with all associated policies.

For Student & Parent Use:

Student Name _____

Signature _____ Date: _____

Parent or Guardian (applicable to users aged 16 and under)

I have read and understood the Acceptable Use Policy. As the parent or legal guardian of the student signing above, I grant permission for my son or daughter to use school computers, electronic telecommunications, email, the school wireless network and the Internet according to this policy. I understand that students will be held accountable for their own actions. I also understand that some materials on the Internet may be objectionable and I accept responsibility for setting standards for my daughter or son to follow when selecting, sharing and exploring information and media.

Parent Signature _____ Date _____

For Staff Use:

Staff/LAC/Governor Name _____

Signature _____ Date: _____

For Office Use:

Username

Tutor Group (if applicable)

Job Title (if applicable)