PCA'S STUDENT INTERNET USE AGREEMENT
APPLICATION AND PERMISSION FORM
(Please return to your child's teacher the first week of school)

Student's Full Name: _____
(Please print) Last First Middle

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

I have read, understand, and will abide by the Pinnacle Classical Academy Student Acceptable Use Policy. I understand any violation of this policy could be considered unethical and may constitute a criminal offense. Should I commit any violation, I understand that my access privileges may be revoked and disciplinary action and/or legal action may be taken.

Student User Signature: _____ Date: _____

Parent or Guardian: (If student is under the age of 18, a parent or guardian must also read and sign this agreement.)

As the parent or guardian of this student, I have read the Student Acceptable Use Policy for Pinnacle Classical Academy. I understand this access is designed for educational purposes only. I also recognize it is impossible to restrict access to all inappropriate materials, and I will not seek to hold the school system responsible for materials acquired on the network. I accept full responsibility for my child's compliance with the Acceptable Use Policy.

My child/student *can use and access* Pinnacle Classical Academy's computer resources.
Yes _____ No _____ (Please circle answer choice and Initial)

I *give my permission* for my student to have Internet access.
Yes _____ No _____ (Please circle answer choice and Initial)

I *give my permission* for my student to have a monitored email account.
Yes _____ No _____ (Please circle answer choice and Initial)

Parent/Guardian Name: _____
Last First

Parent Signature: _____ Date: _____

_____I DO NOT give my permission for my student to have any access to Pinnacle Classical Academy's computer resources of any kind.