

COLCHESTER SCHOOL DISTRICT

ADULT

**Agreement and Application for
Colchester School District Network/Internet Account**

DIRECTIONS: After reading the **Colchester School District Acceptable Use Policy** please read and fill out the appropriate portions completely and legibly. Return your signed contract to the Technology Assistant.

AGREEMENT PORTION OF DOCUMENT: I have read, understood and will abide by the **Colchester School District Acceptable Use Policy**. Should I commit any violation, my access privileges may be revoked or suspended, and school disciplinary actions and/or appropriate legal action may be taken. I understand that the Colchester School District may inspect or review my account and files for security and compliance purposes, without prior notice to me.

Name (please print clearly): _____

Position: _____

Signature: _____

Date: ____ / ____ / ____

Daytime Phone Number: _____

Evening Phone Number: _____