

CODE: IJNDB-E2

STUDENT REQUEST TO USE A PRIVATELY-OWNED COMPUTER FORM

The School Committee has adopted a STUDENT COMPUTER AND INTERNET USE RULES Policy and Procedure (Policy IJNDB/IJNDB-R). The Kittery School Department does not allow students to use privately-owned computers at school without a legitimate educational reason. Exceptions to the prohibition against students using privately-owned computers at school are made on an individual basis, considering the circumstances of the particular student.

Any request for an exception must be made on this form and signed by the student, his/her parent, a teacher, the building administrator, and the Technology Coordinator. The request will be reviewed by the principal and the Technology Coordinator, and a decision will be made within a reasonable time.

Student Name and Grade:
Type of Computer and Serial Number:
Reason for personal computer use at school:

By signing this form, I agree that if my request to use my personal computer at school is granted, I will abide by the following requirements:

1. I agree only to use the computer registered on this form at school and to use it at school only for educational purposes.
2. I understand that I am responsible for the proper care of my computer, including any cost of repair, replacement or any modifications needed to use the computer at school.
3. I understand that the Kittery School Department is not responsible for damage, loss or theft of my computer.
4. I understand that I am required to comply with all School Committee policies, procedures and school rules while using my computer at school.

5. I understand that I have no expectation of privacy in my use of my computer while it is being used at school. The contents of the computer may be searched in accordance with applicable laws and policies.

_____ Date: _____
Student Signature

_____ Date: _____
Parent Signature

_____ Date: _____
Building Administrator Signature

_____ Date: _____
Technology Coordinator Signature

TECHNOLOGY REQUIREMENTS MET: _____ **YES** _____ **NO**

Technology Coordinator Signature: _____

Date: _____

REQUEST APPROVED: _____ **REQUEST DENIED:** _____

Name of Authorizing Principal: _____

Signature: _____

Date: _____