

Fulton Science Academy MIDDLE SCHOOL



1675 Hembree Rd Alpharetta, GA 30004 Tel:770.753.4141 <http://www.fultonscience.org>

Fulton County Schools Computer/Internet Acceptable Use Agreement

Student Agreement

My parent/guardian has discussed the computer/internet rules with me. I agree to follow the rules.

Student's Name _____

School's Name: Fulton Science Academy MS

Student's Signature _____ Date _____

Parent/Guardian Agreement

As the parent or guardian of this student, I have read and discussed with my child the Computer/Internet Acceptable Use Policy of Fulton County Schools. I understand that the computer facilities and the internet are designed for educational purposes. I further understand that Fulton County Middle Schools and the Board of Education have taken precautions to restrict access to inappropriate material, but my son/daughter is ultimately responsible for restricting himself/herself from this inappropriate material and will not hold them or their designees responsible for materials acquired on the network.

_____ I grant permission.

_____ I do not grant permission.

Parent/Guardian Name (please print) _____

Parent's Signature _____ Date _____

Telephone _____ Email Address _____