

**POCONO MOUNTAIN SCHOOL DISTRICT
P.O. Box 200
Swiftwater, PA 18370**

CIS ACKNOWLEDGMENT AND CONSENT FORM

Students

I have received, read, and understand this policy and will comply with it. Someone from the school district has also reviewed this policy with me and my parents/guardians have reviewed it with me. In addition, I have been given the opportunity to obtain information from the school district and my parent(s)/guardian(s) about anything I do not understand, and I have received the information I requested. If I have further questions I will ask my principal. Additionally, I understand that if I violate the policy, I am subject to the school district's discipline and could be subject to ISP, as well as local, state and federal legal recourse.

Name of Student

Signature of Student

Date of Signature

Parent(s)/Guardian(s)

As the parent/guardian of a student of the school district, I have received, read, and understand the Acceptable Use of the Computers, Network, Internet, Electronic, Communications and Information Policy.

The policy is located in the district's policy manual found at:

<http://www.boarddocs.com/pa/pmsd/Board.nsf/goto?open&id=9XYQYS5C8AD1>

In addition, I reviewed this policy with my child and answered questions they asked. If either my child or I have further questions I will ask the principal. I agree to have my child abide by the requirements of the policy.

Name of Parent/Guardian

Signature of Parent/Guardian

Date of Signature