

Comfrey School District-Appropriate Use Policy
Student-Internet Use Agreement

Student Name (First)_____ (M.I.)_____ (Last)_____

Grade_____ Graduation Year _____

I give permission for my child to use the Internet subject to the provisions of the Agreement.

Parent/Guardian Signature _____ Date _____

If I have the opportunity to use the District computer equipment, I will do so subject to the provisions of the Student Internet Use Agreement.

Student Signature _____ Date _____

Student Name (First)_____ (M.I.)_____ (Last)_____

Grade_____ Graduation Year _____

If I have the opportunity to use the District computer equipment, I will do so subject to the provisions of the Student Internet Use Agreement.

Student Signature _____ Date _____

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Grade_____ Graduation Year _____

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