

## Our Lady of Sorrows School **TECHNOLOGY Parental Agreement Form**

Our Lady of Sorrows School allows student access to technology/digital resources and/or accounts to further its educational goals and objectives. Reasonable care is taken to assure the appropriateness and educational quality of the material available through the use of educational software and technologies. However, parents and guardians are warned that Our Lady of Sorrows School and the Diocese of Brownsville do not have total control of the information on the Internet. Our Lady of Sorrows School and the Diocese of Brownsville are not responsible for the accuracy, nature or quality of information stored on school digital media, nor for accuracy, nature or quality of information gathered through school internet access. Parents and guardians are the primary authority responsible for imparting the standards of ethical and legal conduct their child or ward should follow. Therefore, Our Lady of Sorrows School supports and respects each family's right to decide whether or not their child may have access to this resource.

1. I am the parent/guardian of the below named student. I have read the Technology Acceptable Use Policy ("the policy") as stated in the Student/Parent Handbook and I have either explained it to my child/ward ("student") or I have assured myself that the student understands it. I also understand my own and the student's responsibilities regarding technology and Internet access at Our Lady of Sorrows School. I also understand that children's digital activities at home should be supervised as they can affect the academic environment at school.

| 2. <u>Initial</u>           | one:   |   |
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|                             | resources and/or accounts at Ou<br>and hold harmless the Diocese o<br>any claim or loss resulting from | having access to, and use of, the technology/digital ar Lady of Sorrows School. I also hereby indemnify f Brownsville and Our Lady of Sorrows School from any infraction of the policy or any applicable law. |
|                             |  | Lady of Sorrows School. I also understand that this academic performance, as well as my ability as a al information.  |
| Parent/Guardian's Signature |  | Date  |
| Name of Pare                | nt/Guardian's (Please Print)   |   |
| Name of Stud                | lent(s) and Grade (Please Print)   |   |
| Street Address              | s  |   |
| City/State/Zip              | )  |   |
| Home Phone                  |  | Work Phone  |