

Employee User Access Informed Consent Form

In consideration for the privilege of using the network and in consideration for having access to the public networks, I hereby release Kiona-Benton City School District #52, the K-20 Network, and other intermediary providers, operators, and affiliated institutions from any and all claims and damages of any nature arising from my use, or inability to use, the K-20 Network including, without limitation, the type of damages identified in the Kiona-Benton City School District's Network and Internet Services Acceptable Use Guidelines. Further, I agree to abide by the District's Policy and Procedure for Electronic Information Systems, which I have reviewed and understand.

Printed Name of User: _____

Signature of User: _____

Date Signed: _____

For future reference, please visit the District web site(<http://www.kibesd.org>) to view the Network and Internet Services Acceptable Use Guidelines.

This form must be signed and on file with the District prior to any network access

For Office Use Only	
Assigned / Requested Password:	_____
Building / Location:	_____
Job Title:	_____
Comment:	_____