

BCS-NET STAFF USER AGREEMENT FORM

I have read and agree to the Bardstown City Schools' Appropriate Use Policy, AUP Procedures, and I understand that I may be held responsible for violations. I understand that some materials on the Internet may be objectionable; therefore, I agree to accept responsibility for standards for selecting, sharing and or exploring information and media.

Please complete this form to indicate that you agree with the terms and conditions outlined in Board AUP Policy and Procedures. Your staff signature is mandatory before access may be granted to BCS-Net. As a staff member of the Bardstown City Schools and a user of the network resources, I have read and hereby agree to comply with the BCS-Net Appropriate Use Policy, and Procedures.

Staff Name (Please Print): _____

Staff's School: _____

Staff Signature: _____ Date: _____