

STAFF APPLICATION FOR ACCESS TO TECHNOLOGY RESOURCES

Below is a list of examples of acceptable and unacceptable uses for your reference. Please understand that the list is not exhaustive and simply serves as a very brief review.

Examples of Acceptable Use — I will...

- ✓ Use school technology systems and resources for academic endeavors.
- ✓ Be respectful of others and encourage responsible online behavior.
- ✓ Use technology resources carefully, and alert staff to any issues with their operation.
- ✓ Recognize that the use of school technologies is a privilege and treat it as such.
- ✓ Proactively help to protect the security of school resources by ensuring that I only open resources known to be secure and by immediately reporting any security related issues.

Examples of Unacceptable Use — I will not...

- ✓ Store personal pictures, movies, and other large files on Capital School District Resources.
- ✓ Try to find ways to circumvent the school's safety measures and filtering tools.
- ✓ Use language online that would be unacceptable in the classroom.
- ✓ Attempt to hack or access sites, servers, or content that isn't intended for my use.

I have read and understand the Acceptable Use Policy and agree to abide by it. If I have questions, they will promptly be reported to the Technology Department using the established reporting method. I understand that any violation of these policies could result in loss of access, personal payment of any fees incurred, and possible prosecution. As with other Capital School District policies, any personnel whose conduct violates this policy will be subject to the Capital School District's disciplinary measures, up to and including termination.

Date: _____ Signature of Applicant: _____

| |
|-------------------------------------------------------------------|
| All fields below and on the second page must be completed. |
|-------------------------------------------------------------------|

Full Legal Name: _____

Address: _____

Birth date: _____ **Phone:** _____

School(s)/Building: _____

Position (please check all applicable, or provide details under “Other”):

| | | | |
|------------------------------------------------|-------------------------------------------------------|---------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> District Office Admin | <input type="checkbox"/> District Office Staff | <input type="checkbox"/> Principal | <input type="checkbox"/> Associate Principal |
| <input type="checkbox"/> Dean | <input type="checkbox"/> Teacher | <input type="checkbox"/> Special Ed Teacher | <input type="checkbox"/> Instructional Para |
| <input type="checkbox"/> Extra Support Para | <input type="checkbox"/> Behavior Para | <input type="checkbox"/> Office Para | <input type="checkbox"/> Secretary |
| <input type="checkbox"/> Clerk | <input type="checkbox"/> Special Ed Coordinator (SEC) | <input type="checkbox"/> BCBA | <input type="checkbox"/> SLP |
| <input type="checkbox"/> Psychologist | <input type="checkbox"/> Therapist | <input type="checkbox"/> Counselor | <input type="checkbox"/> Instructional Coach |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Bus Driver | <input type="checkbox"/> Bus Aide | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Nutritional Staff | <input type="checkbox"/> Custodial | <input type="checkbox"/> SRO / Constable | <input type="checkbox"/> Office of Technology |

| | | |
|-----------------------------------------------------|-----------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Substitute Teacher or Para | <input type="checkbox"/> Substitute Nurse | <input type="checkbox"/> Substitute Bus Driver |
| <input type="checkbox"/> Substitute Bus Aide | <input type="checkbox"/> Substitute Secretary | <input type="checkbox"/> Substitute Custodian |

Other: _____

Type of Employee:

☐ Full Time ☐ Part Time ☐ Contractor

Contract Type:

☐ 10 month ☐ 12 month