

**HARDING MIDDLE SCHOOL**  
**STUDENT APPLICATION & AGREEMENT FORM**  
**STEUBENVILLE CITY SCHOOL DISTRICT**  
**ACCEPTABLE USE POLICY FOR STUDENTS**  
**COMPUTER FACILITIES, VIDEOCONFERENCING & OTHER MEDIA**

I understand and will abide by the terms and conditions specified by the Steubenville City Schools computer facilities and any associated facilities such as OMERESA, OECN, NSF, etc. I understand that violation of their agreement is unethical and may constitute a criminal offense. I further understand that I am responsible for all of my actions and any violation may result in my privileges being revoked, school disciplinary action, and appropriate legal action.

The Steubenville City Schools, OMERESA and the OECN make no warranties of any kind, expressed or implied, for the service being provided and will not be responsible for any damages suffered, including loss of data resulting from delays, non-deliveries, or service interruptions caused by negligence, errors, or omissions. The Steubenville City Schools, OMERESA and the OECN specifically deny any responsibility for the accuracy or quality of information obtained through the network services; use of any such information is at the user's risk.

We are continuing to utilize School Messenger this year as we would like to keep you informed of upcoming events and school news by using email. Your email address will not be shared or used for any other purpose. If you do not have access to email, please indicate on the form below and we will send the information home in the mail. This makes it easier to get pertinent information to you quicker than ever. We will send information through email or do a one call with your phones. If you have any questions and/or concerns, please let us know.

STUDENT'S NAME (please print): \_\_\_\_\_

STUDENT'S HOME ADDRESS: \_\_\_\_\_

STUDENT'S HOME PHONE #: \_\_\_\_\_ CELL# \_\_\_\_\_

GRADE: \_\_\_\_\_ HOMEROOM TEACHER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

STUDENT'S SIGNATURE: \_\_\_\_\_

PARENT(S)/GUARDIAN(S) SIGNATURE: \_\_\_\_\_

PARENT(S) EMAIL: \_\_\_\_\_

2<sup>ND</sup> EMAIL: \_\_\_\_\_

WE DO NOT HAVE ACCESS TO EMAIL

DATE: \_\_\_\_\_

This agreement form must be returned to your building principal who will then submit it to the district technology coordinator.

Final account approval will be issued through:

STEUBENVILLE CITY SCHOOL DISTRICT  
611 NORTH FOURTH STREET  
STEUBENVILLE, OHIO 43952