



Huron-Superior Catholic

DISTRICT SCHOOL BOARD

ACCEPTABLE USE OF INFORMATION AND COMMUNICATION TECHNOLOGY RESOURCES STAFF APPLICATION AND AGREEMENT

Directions:

After reading the Regulations governing “*Acceptable Use of Information and Communication Technology Resources*”, please complete the appropriate sections of the following contract. Return the contract to the HUMAN RESOURCES DEPARTMENT.

I have read the procedural guidelines of the Regulations governing “Acceptable Use of Information and Communication Technology Resources”. I understand and will abide by these regulations. I further understand that violation of the regulations is unethical and may constitute a criminal offence. Should I fail to comply with any or **all** of the regulations, my access privileges may be revoked and/or appropriate legal action taken.

LAST NAME: _____ FIRST NAME: _____
(PRINT) (PRINT)

CHECK ONE:

- | | |
|---|--|
| <input type="checkbox"/> TRUSTEES | <input type="checkbox"/> BOARD OR SCHOOL ADMINISTRATOR |
| <input type="checkbox"/> TEACHER | <input type="checkbox"/> E.C.E. |
| <input type="checkbox"/> OFFICE/ ADMINISTRATION STAFF | <input type="checkbox"/> EDUCATIONAL ASSISTANT |
| <input type="checkbox"/> CARESTAFF/ MAINTENANCE STAFF | <input type="checkbox"/> STUDENT SUPPORT WORKER |
| <input type="checkbox"/> NOON-HOUR AIDE | <input type="checkbox"/> ADMINISTRATORS |
| <input type="checkbox"/> SUPPORT STAFF | <input type="checkbox"/> MANAGER |

OTHER _____

SCHOOL/DEPARTMENT: _____

SIGNATURE: _____ DATE: ____ / ____ / ____

When your account is established, the Human Resources Department will notify you of your username and password.