



Kenton County School District | It's about ALL kids.

# ISSUE PAPER

**DATE:**

July 25, 2025

**AGENDA ITEM (ACTION ITEM):**

Receive the revision draft for Procedure 08.2323 AP.21 (Electronic Access/User Agreement Form) with minor changes.

**APPLICABLE BOARD POLICY:**

01.51 – Administrative Procedures

**HISTORY/BACKGROUND:**

The Kentucky School Board Association completed a review and updated our district procedures after the legislative session to align our procedures with revised statutes. District administrators also reviewed and revised several procedures that are included in the annual update as well.

**FISCAL/BUDGETARY IMPACT:**

None

**RECOMMENDATION:**


Receive the revision draft for Procedure 08.2323 AP.21 (Electronic Access/User Agreement Form) with minor changes.

**CONTACT PERSON:**

Henry Webb

\_\_\_\_\_  
*Principal/Administrator*

\_\_\_\_\_  
*District Administrator*

  
\_\_\_\_\_  
*Superintendent*

*Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda. Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.*

**Electronic Access/User Agreement Form**

User's Name _____				
Last Name		First Name		Middle Initial
User's Address _____				
City		State		Zip Code
User's Age _____	Date of Birth _____	Sex _____	Phone Number _____	School _____
If applicable, User's Grade _____		Homeroom/Classroom _____		
Do you have internet access at home? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Please check if you are a ☐ student ☐ certified employee ☐ classified employee ☐ member of the community.

As a user of the \_\_\_\_\_ District's computer network, I hereby agree to

*District Name*

comply with the District's Internet and electronic mail rules and to communicate over the network in a responsible manner while abiding by all relevant laws and restrictions. I further understand that violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked and school disciplinary action and/or legal action may be taken.

User's Name (Please print) \_\_\_\_\_

*User's Signature*

*Date*

**PRIOR TO THE STUDENT'S BEING GRANTED INDEPENDENT ACCESS PRIVILEGES, THE FOLLOWING SECTION MUST BE COMPLETED FOR STUDENTS UNDER 18 YEARS OF AGE:**

As the parent or legal guardian of the student (under 18) signing above, I grant permission for my child to access networked computer services such as electronic mail and the Internet. I understand that this access is designed for educational purposes; however, I also recognize that some materials on the Internet may be objectionable, and I accept responsibility for guidance of Internet use by setting and conveying standards for my child to follow when selecting, sharing, researching, or exploring electronic information and media.

**CONSENT FOR USE**

By signing this form, you hereby accept and agree that your child's rights to use the electronic resources provided by the District and/or the Kentucky Department of Education (KDE) are subject to the terms and conditions set forth in District policy/procedure. Please also be advised that data stored in relation to such services is managed by the District pursuant to policy 08.2323\* and accompanying procedures. You also understand that the e-mail address provided to your child can also be used to access other electronic services or technologies that may or may not be sponsored by the District, which provide features such as online storage, online communications and collaborations, and instant messaging. Use of those services is subject to either standard consumer terms of use or a standard consent model. Data stored in those systems, where applicable, may be managed pursuant to the agreement between KDE and designated service providers or between the end user and the service provider. Before your child can use online services, he/she must accept the service agreement and, in certain cases, obtain your consent.

Name of Parent/Guardian (Please print) \_\_\_\_\_

*Signature of Parent/Guardian*

*Date*

Daytime Phone Number: \_\_\_\_\_ Evening Phone Number: \_\_\_\_\_

**NOTE: FEDERAL LAW REQUIRES THE DISTRICT TO MONITOR ONLINE ACTIVITIES OF MINORS.**

\*Our Acceptable/Responsible Use Policy (AUP/RUP) 08.2323 can be found on our district website at [kenton.kyschools.us/docs/AUP2012.pdf](http://kenton.kyschools.us/docs/AUP2012.pdf)

Please read this policy and return this completed form to your school. If you do not have access to the internet at home, please request a copy of this policy from your school's office.