

# **Coffee County School System Student Responsible Use Policy (RUP)<sup>rev.2025</sup>**

## **Acknowledgement /Parent Permission Form**

I (student name) \_\_\_\_\_ have read and agree to comply with the Coffee County School System Responsible Use Policy. I understand that any violation of this policy may result in disciplinary action and the removal of computer/network access privilege.

Student School \_\_\_\_\_

Student Signature \_\_\_\_\_

(or electronic acknowledgement)

Date \_\_\_\_\_

### **Parent/Guardian Acknowledgement and Permission**

As a parent or legal guardian of the above student, I understand that the Coffee County School System provides my student with internet access and access to digital resources. I understand that CCSS has implemented technology protection measures including filtering and monitoring to prevent students from accessing inappropriate materials on the Internet, but that such measures may not be one hundred percent effective at all times and it is impossible to restrict access to all controversial content. With this understanding, I grant permission for my student to access the Internet and for CCSS to maintain a Google Workspace account for my child and access the Google Services the district uses for instruction . I also understand that CCSS provides my student with robust digital resources for classroom instruction that have been found to meet the Federal Trade Commissions' (FTC) regulations in regard to the Child Online Privacy Protection Act (COPPA). Some of these resources may require student login credentials, which I authorize at the district's discretion. A list of district-approved websites can be found at the district's website at [www.coffeecountyschools.com](http://www.coffeecountyschools.com) under the COPPA heading. I understand that the CCSS RUP restrictions and guidelines are necessary components in protecting my child from exposure to inappropriate materials and from participating in inappropriate activities. I understand that any violation of this policy may result in disciplinary action and the removal of computer access privilege for my student.

I give permission for County Schools to use my student's name, photograph, likeness, voice, or student work for state-required academic screenings or testing, district screening or testing, educational and positive school recognition purposes, publications, posters, brochures, and newsletters; on the district and school websites, radio station, Cable TV channel; or at community fairs, special district events, or district-sponsored social media.

Printed Name of Parent/Guardian \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(or electronic acknowledgement)