

EAST STROUDSBURG AREA SCHOOL DISTRICT
50 Vine Street
East Stroudsburg, PA 18301

CIS Acknowledgment and Consent Form

Acceptable Use of Communications and Information (CIS) Systems Policy #815

Employees

As an employee of the School District, I have received, read, and understand the Acceptable Use of the Communications and Information (CIS) Systems Policy. In addition, I reviewed this policy with my students and answered questions they asked. If I have further questions, I will ask the Director of Technology. I agree to comply with this policy, other related policies, regulations, rules, and procedures. Additionally, I understand that if I violate this policy, other related policies, regulations, rules, and procedures I am subject to the School District's discipline, ISP requirements, as well as local, state, and federal laws.

Name of Employee

Employee #

Signature of Employee

Building/School

Date of Signature

Position