



**THE SCHOOL BOARD OF COLLIER COUNTY  
ACCEPTABLE USE AND SAFETY POLICY  
ACKNOWLEDGEMENT FORM**

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By signing below, I acknowledge that I have received and read the District School Board of Collier County (DSBCC) Technology Privacy Policy (Policy No.: 7540.01) and Staff Network and Internet Acceptable Use and Safety Policy (Policy No.: 7540.04) and agree to abide by their provisions.

I certify that I understand these policies, its application and its implications.

I accept my obligation to maintain the appropriate and acceptable use of educational and administrative electronic communications.

I understand that violation of these provisions may result in disciplinary action including but not limited to; civil or criminal proceedings, restriction of electronic access, and termination of contract or any other legal remedy available to DSBCC.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Employee ID Number

\_\_\_\_\_  
Job Title and School/Department

\_\_\_\_\_  
Network Username

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date