

# ANACORTES SCHOOL DISTRICT #103

2200 M Avenue Anacortes WA 98221 Phone: (360) 293-1200 Fax: (360) 293-1222  
http://www.asd103.org

Procedure 2022-F4  
Instruction

## Electronic Resources

### Adult/Staff Acceptable Use

Printed Name: \_\_\_\_\_

1. I hereby certify that I have read and understand the Electronic Resources Policy (No. 2022).
2. As a user of the Anacortes School District (ASD) computer network, I certify that I have read and understand the Electronic Resources Procedures (No. 2022P) concerning the use of ASD network and computers to access networked computer services such as electronic mail and internet.
3. Furthermore, I understand that violation of the policy or procedures could result in the loss of privilege to use ASD computers or to access the ASD network and could also result in discipline up to and including termination of employment.
4. Furthermore, I understand that if I am in violation of the policy and procedures with respect to the use of any personal device, I assume all responsibility.

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### Job Type (mark one):

- |  |  |   |
|--|--|---|
| <input type="radio"/> <b>Certificated Employee</b>   | <input type="radio"/> <b>Classified Employee</b>   | <input type="radio"/> <b>Student Teacher</b>            |
| <input type="radio"/> <b>Certificated Substitute</b> | <input type="radio"/> <b>Classified Substitute</b> | <input type="radio"/> <b>Personal Services Contract</b> |
| <input type="radio"/> <b>Other</b> _____             |  |   |

Building \_\_\_\_\_ Assignment \_\_\_\_\_

Student Teacher or Substitute for \_\_\_\_\_

Start Date \_\_\_\_\_

End Date \_\_\_\_\_

**Administrator Signature** \_\_\_\_\_

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### Human Resources Use ONLY

**Domain/Email User ID Assigned:** default username (first initial and last name): \_\_\_\_\_

**Password:** default password (first initial, last name, pass): \_\_\_\_\_  
(e.g. Fred Smith initial password is fsmithpass)

\*Remember to login on to a district computer to set up your initial password\*