



Internet Parent Permission Form – KS2

Please complete and return this form to your child's class teacher.

Child

Rules:

- Be polite – I will use appropriate language, which will not upset others.
- Privacy – I will not reveal any personal information about myself or other people (e.g. home address, telephone number).
- Respect - I will not change anybody's work without asking them.
- Password – I will keep my password to myself and not share it with others.
- Care - I will listen carefully to my teacher and ask for help if I don't understand something.
- Content - If I see anything I don't like or know is inappropriate, I will tell my teacher straight away.
- E-mail - I will only send an e-mail with my teacher's permission.
- Rules - If I know of anyone who is not following the rules I will tell my teacher.
- I must not use the computers without an adult being present and must always ask for permission before using the internet.

As a school user of the Internet:

- I will use the Internet in a responsible way and I agree to follow the school rules on its use.
- I understand that if I do not follow the rules, I will no longer be allowed to use the Internet in school.

Pupil Signature _____

Date: ___/___/___

Parent

As the parent or legal guardian of the pupil signing above, I grant permission for my daughter to use e-mail and the Internet. I understand that pupils will be held accountable for their own actions. I also understand that although the school will take reasonable steps to ensure that my child is appropriately supervised and protected from unsuitable content whilst online, I will not hold the school responsible for inappropriate material which my child may obtain. I accept responsibility for setting standards for my daughter to follow when selecting, sharing and exploring information and media. I agree to report any misuse of the computer network to the school.

I agree to the above / I do not agree to the above *

My child's work may / may not be published on the internet *

(* please delete as applicable)

N.B. Please ensure both choices have been clearly marked otherwise this form will be invalid.

Parent Signature _____

Date ___/___/___

Name of Pupil _____