



**THE NEWARK PUBLIC SCHOOLS**

University High School of Humanities  
55 Clinton Place  
Newark, New Jersey 07108  
Phone: 973-374-2944  
Fax: 973-374-2298



**Edwin Mendez**  
Principal

**Christopher Cerf**  
State District Superintendent

**David Hespe**  
Commissioner of Education

**STUDENT ACCEPTABLE USE POLICY AGREEMENT**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

I have read the Newark Public Schools Acceptable Use Policy. I agree to follow the rules contained in the policy and to use my computer account and the internet in a responsible manner.

- I understand that the use of the computer network and internet is limited to academic activities and is a privilege.
- Should I violate the policy, I understand that my internet access and/or computer account may be suspended or terminated and other disciplinary action or legal action may be taken against me.

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

PARENT/GUARDIAN, IT IS EXTREMELY IMPORTANT THAT YOUR CHILD IS INSTRUCTED TO ADHERE TO THE ACCEPTABLE USE POLICY. WE URGE YOU TO DISCUSS THESE RULES AND THE POLICY WITH YOUR CHILD BEFORE RETURNING TO THE SCHOOL.

- I have read and understand the Newark Public Schools' Acceptable Use Policy relating to use of the NPS computer network and the internet.
- I understand that the computer network and the internet access are being provided for educational purposes.
- I have discussed this policy with my child.
- I understand that my child will be subjected to disciplinary action for violation of any of these rules. I also understand that violation of this policy will result in loss of internet access, termination of network privileges for repeated violations, and may include other disciplinary and legal action, if warranted.
- I recognize that this is possible for the district to restrict access to all controversial materials available on the internet and I will not hold the school district responsible for controversial materials acquired by my child while online.
- I agree to release the District and its teachers from and against any and all claims arising from my child's misuse of the NPS computer network and the internet.
- I agree to be responsible if my child misuses the NPS computer network, the internet, or other online systems.

I hereby give permission for my child to use the District computer account and the internet. I certify that the information contained in this form is correct and true.

PRINT NAME \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

**GOOD TO G.R.E.A.T. – WE LIVE THIS!**



**THE NEWARK PUBLIC SCHOOLS**

University High School of Humanities  
55 Clinton Place  
Newark, New Jersey 07108  
Phone: 973-374-2944  
Fax: 973-374-2298



**Edwin Mendez**  
Principal

**Christopher Cerf**  
State District Superintendent

**David Hespe**  
Commissioner of Education

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

**POWERSCHOOL PARENT PORTAL AUTHORIZATION AGREEMENT**

Each parent/legal guardian may request and receive access credentials (Access ID and Access Password) that provides view access to their student's information via PowerSchool Parent Portal.

**NOTE: The Access ID and Access Password for your students should be protected. Only provide this information to individuals who need to monitor your student's progress.**

Please fill out the information below for all students (elementary, middle and high school) for whom you are requesting access. You need only to submit this form to ONE school. In other words, if you have children at more than one school, you can sign up for access to all your children's information at one school.

Student's Last Name	Student's First Name	Student's Date of Birth	Student's Grade	Student's School

The undersigned, parent/legal guardian of the above named student(s), requests and authorized Newark Public Schools (NPS) to make available student grades, attendance, and other information about their student(s) through the use of the Parent Portal in PowerSchool. This authorization will remain in effect for the duration of the student's enrollment in the NPS system unless revoked. The undersigned, acknowledges having read, understood, and agreed to the Newark Public Schools Acceptable Use of the Internet Policy (AUP).

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Print name of Parent/Guardian \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

**GOOD TO G.R.E.A.T. – WE LIVE THIS!**