

**Liberty Union-Thurston Local School District**  
**Student Acceptable Use Policy (AUP) Agreement**

By signing below I, as a student of Liberty Union Thurston Local School District, hereinafter referred to as LUTSD, acknowledge that I have read, understand, and agree to the LUTSD's technology policies, rules, and guidelines as stated in the LUTSD Acceptable Use Policy. I understand that if any of the policies, rules, or guidelines are violated, appropriate disciplinary action will be taken. This may include, but is not limited to, suspension of computer privileges, Moodle, School Provided Email, and/or network accounts being locked, and other disciplinary action deemed appropriate by LUTSD Administration.

\*This agreement supersedes any previous computer use policies.

\_\_\_\_\_  
**Student Printed Name**

\_\_\_\_\_  
**Grade Level**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Parent / Guardian Signature**

\_\_\_\_\_  
**Date Signed**