



NEWMAN YOUTH CENTER STUDENT ACCEPTABLE USE AGREEMENT

INTERNET ACCESS

Youth Center provided Internet access is intended to promote educational excellence by facilitating resource sharing, communication, and access to the most current information. While access to the Internet will provide the opportunity to explore thousands of information resources, families should be warned that some material accessible via the Internet may be illegal, defamatory, inaccurate, or potentially offensive. It is the intent of the City of Newman that youth center provided Internet access be used only to pursue educational goals and objectives; however, students may find ways to access inappropriate materials. In accordance with federal law, appropriate measures, including Internet filters, will be taken in an effort to block language and visual depictions that are obscene, offensive, lewd or pornographic and lacking serious literary, artistic, political or scientific values with respect to minors. Students may be allowed electronic mail access to their own personal accounts.

To gain Internet access, all users must sign an Acceptable Use Agreement indicating their understanding of and agreement to abide by Youth Center policy. Students under the age of 18 must also obtain parental permission. Agreements shall be returned to the Youth Center Staff Member.

GUIDELINES FOR STUDENT USE OF YOUTH CENTER PROVIDED COMPUTERS

Students should adhere to the same standard of conduct expected and required in the youth center when using youth center provided computer and technology resources.

Computer and technology resources are the property of the City of Newman. Users should not expect that files stored on youth center system servers and workstations will always be private. The youth center may monitor access to equipment, networking structures and systems, and all data stored or transmitted on youth center computers in order to ensure the security and performance of its equipment, systems, and networks and to enforce applicable laws and policies.

UNACCEPTABLE USE

The following uses are prohibited.

1. Accessing, producing, posting, displaying or sending offensive messages, music or images, including images of exposed private body parts is prohibited. Offensive material includes obscene, profane, lewd, vulgar, rude, or sexually suggestive language or images is prohibited
2. Sending false or defamatory information about a person or organization is prohibited.
3. Harassing, threatening, insulting or attacking others is prohibited.
4. Damaging or changing system settings on computers, software or networks is prohibited.
5. Violating copyright laws is prohibited.
6. Using another student's or staff member's ID or password is prohibited.
7. Illegal or unauthorized use of data in folders or work files is prohibited.
8. Plagiarism is prohibited.
9. Misusing limited resources including distributing mass e-mail messages, participating in chain letters, creating and participating in unauthorized newsgroups storing files on file servers without proper authorization, failing to log out appropriately, and introducing computer viruses is prohibited.
10. Using access for personal, commercial, or for-profit purposes is prohibited.
11. Reading mail or files without the owner's permission is prohibited.
12. Hacking or attempting to gain unauthorized access to the youth center network for the purpose of stealing and/or corrupting data is prohibited.
13. Engaging in, arranging to engage in, or advocating any illegal act or violence (including accessing materials about pornography and hate literature) is prohibited.
14. Downloading software or files without permission is prohibited.
15. Use of a chat room is prohibited.
16. Vandalism, abuse or misuse of property is prohibited.
17. Any other use in violation of federal or state law is prohibited.

CONSEQUENCES OF VIOLATION OF POLICY

In the event that a student violates this policy, the following consequences may result. Any of these consequences may be enforced alone or in conjunction with one another by the youth center against the violating student.

1. Revocation or limitation of access privileges.
2. Disciplinary action including youth center supervision.
3. Personal liability for damage to youth center system computer resources caused by intentional misuse.
4. Any other sanctions or remedies provided by law.



WAIVER OF RESPONSIBILITY

User's Full Name (please print): _____

I understand and will abide by the Newman Youth Center Acceptable Use Policy and understand that any violation of this policy is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked and disciplinary action and/or appropriate legal action may be taken.

User Signature: _____ **Date:** _____

PARENT OR GUARDIAN (If you are under the age of 18 a parent or guardian must also read and sign this agreement.)

As the parent or guardian of this student, I have read the Newman Youth Center Acceptable Use Policy. I understand that this access, including access to the Internet, is designed for educational purposes only. I also recognize that it is impossible to restrict access to all inappropriate materials and I will not hold the City of Newman responsible for materials accessed on the network. I accept full responsibility for my child's compliance with the Acceptable Use Policy and hereby give my permission for my child to use the network.

Parent or Guardian (please print) _____

Signature: _____ **Date:** _____



**Stanislaus County
Community Development Block Grant (CDBG) Program
2009 Participation Data**

Program: _____

The service being provided to you is funded in part by the U.S. Department of Housing and Urban Development (HUD). HUD monitors the County as to the income and ethnicity of program participants. The information being requested is only for monitoring and auditing purposes, as required by HUD, and is not intended for public dissemination. Please provide the information requested below. Thank you for your cooperation.

1. Head of Household: Are you the head of household? Yes _____ No _____

2. Household Size and Total Annual Household Income:

- A. Circle the total number of people in your household (in the first column)
 B. On the line corresponding to your household size, check the income range that includes your household's annual income.

A. Household Size (Circle One) **B. Total Household Income:** (for your household size, check the box that corresponds to your household's total annual income- check only one)

	<u>Extremely Low</u>	<u>Low</u>	<u>Moderate</u>
1	<input type="checkbox"/> \$12,550 or less	<input type="checkbox"/> \$12,551-\$20,850	<input type="checkbox"/> \$20,851-\$33,400
2	<input type="checkbox"/> \$14,300 or less	<input type="checkbox"/> \$14,301-\$23,850	<input type="checkbox"/> \$23,851-\$38,150
3	<input type="checkbox"/> \$16,100 or less	<input type="checkbox"/> \$16,101-\$26,800	<input type="checkbox"/> \$26,801-\$42,950
4	<input type="checkbox"/> \$17,900 or less	<input type="checkbox"/> \$17,901-\$29,800	<input type="checkbox"/> \$29,801-\$47,700
5	<input type="checkbox"/> \$19,350 or less	<input type="checkbox"/> \$19,351-\$32,200	<input type="checkbox"/> \$32,201-\$51,500
6	<input type="checkbox"/> \$20,750 or less	<input type="checkbox"/> \$20,751-\$34,550	<input type="checkbox"/> \$34,551-\$55,350
7	<input type="checkbox"/> \$22,200 or less	<input type="checkbox"/> \$22,201-\$36,950	<input type="checkbox"/> \$36,951-\$59,150
8	<input type="checkbox"/> \$23,650 or less	<input type="checkbox"/> \$23,651-\$39,350	<input type="checkbox"/> \$39,351-\$62,950

3. Do you receive income from any of the following sources?:

_____ CalWORKs _____ General Assistance _____ Social Security
 _____ Food Stamps _____ Medi-Cal _____ Other: _____

4. Race (Check only one):

_____ American Indian/Alaskan Native _____ Asian _____ White
 _____ Native Hawaiian/Pacific Islander _____ Asian & White _____ Black/African American
 _____ American Indian/Alaskan Native & White _____ Black/African American & White
 _____ American Indian/Alaskan Native & Black/African American
 _____ Other Multi- Racial (specify): _____
 _____ Hispanic Ethnicity (you must also check one of the racial categories if you select this category)

_____ Female _____ Male _____ 62 years +/Disabled
Name

_____ **Street Address** _____ **City** _____ **Zip Code**

I hereby certify that the above information is true and correct to the best of my knowledge. I acknowledge and understand that the information provided here will be relied upon for purposes of determining my eligibility for this program. I acknowledge that a material misstatement fraudulently or negligently made in this or in any other statement made by me may constitute a federal violation and may result in the denial of my participation in this program.

Signature

Date

Office Use & Referral Use Only:	Phone Call _____	Walk In _____	Meeting _____	Home Visit _____	Other _____
DET _____	MJC _____	CSA _____	CVOC _____	Other _____	