

**MARSHALL COUNTY SCHOOL DISTRICT
EMPLOYEE ACCEPTABLE USE AGREEMENT**

The agreement is found in the Faculty/Staff Handbook and on the district website.
I have read, will abide by and enforce the Employee Acceptable Use Agreement.

Signature _____ Date ___/___/___

Please print name _____

Preferred password (for new accounts or changes only)
(minimum of 8 characters) _____

School _____

Return signed copy to the Superintendent's Office