



Agreement for Aquinas College Computer Network Guest Account

I understand and agree to abide by the Aquinas College Acceptable Use Policy (AUP). I further understand that I am responsible and will be held accountable for any and all activity on my personal network account. I am aware that any violation of the terms of and conditions of the Aquinas College AUP may result in my individual access privileges being revoked and/or the appropriate legal action being taken.

Signature of User:

Printed Name of User:

Username of Account:

Phone Number:

Start Date:

End Date:

Date of Signing:

Please print, complete, and return to the Aquinas College ITS Department (AB350).