



# HIGH POINT UNIVERSITY

The Premier Life Skills University®

## Office of Accessibility Resources and Services

### Technology Use Agreement

I understand that High Point University has granted me assistive technology accommodations to create equal access to my lectures, labs, and academic courses. I agree to adhere to the following statements:

- I understand that because of my disability, I have been approved for technology-based accommodation(s) in the classroom.
- I understand that the use of such technology is solely for the purpose of providing equal access in the classroom/studies.
- I understand that I will not be utilizing the assistive technology for any purposes other than what is outlined for my approved accommodation(s) in my eligibility letter (i.e., online shopping, social media, texting, cheating, etc.).
- I understand that I am prohibited from sharing the recordings, whether audio or visual, in any form, as they are solely intended for my personal study use.
- I understand that violating this agreement will result in the involuntary withdrawal of the approved accommodation.

Any misconduct with assistive technology accommodations within the classroom may result in class dismissal, an Honor Code violation resulting in suspension, being directed to withdraw from the University, or other appropriate sanctions.

I have read and understand the policy on Technology Use as it relates to the following accommodations: "Books in Alternative Format (Audio or E-Texts)," "Consideration for Computer Use," "Listening Device," "Note Taking Assistance (Audio Capture Software)," and/or "Video Record Lectures" and I agree that I will follow the terms of this agreement in accordance with the spirit of the policy.

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Course Name and Section Number

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Professor Name

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Student Printed Name

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HPU ID#

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Student Signature

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Date