

REQUEST TO UNBLOCK/BLOCK AN INTERNET SITE

(Please fill out all items completely and send to your building administrator)

Name: _____

Building(s): _____

Position: (Check one) _____ administration _____ faculty/staff

Web Site for which unblocking/blocking is requested:

url: _____

Title: _____

Author: _____

Rationale for unblocking/blocking this site:

Have you explored the site? (Y/N) _____ Have you explored links from the site? (Y/N) _____

What is the curricular use or value of this site? _____

For what time period and location do you wish this site to be unblocked: (check all that apply)

_____ Permanently _____ For a certain time period from: ___/___/___ to: ___/___/___

_____ At the Jr/Sr High School _____ At the elementary school

_____ At the District Office _____ At all buildings

Staff/Teacher Signature _____ Date: _____

Building Principal Decision: _____ Block _____ Unblock from: ___/___/___ to ___/___/___ _____ Permanently unblock

Principal's Signature: _____ Date: _____

Network Administrator Signature: _____ Date Completed: ___/___/___

