

Student signature

Date: ___/___

CARINGBAH HIGH SCHOOL



Caringbah High School BYOD Student Agreement

Student	t Name):		Year:
otherwise	e directe		ase refer to the DoENSW	he company of a parent or caregiver unless I Online Communication Services – Acceptable
l agree tl	hat I wil	l abide by the school	's BYOD policy and tha	ıt:
✓ Iv	will use t	the department's Wi-Fi	network for learning.	
✓ Iv	will use r	my device during scho	ol activities at the direction	on of the teacher.
✓ Iv	will not a	uttach any school-owne	ed equipment to my mobi	ile device without the permission of the school.
✓ Iv	will use r	my own portal/internet	log-in details and will nev	ver share them with others.
✓ Iv	will stay	safe by not giving my p	personal information to s	trangers.
✓ Iv	will not h	nack or bypass any har	dware and software secu	urity implemented by the department or my school.
✓ Iv	o 0 o p o t o a	use my own device to k offensive oornographic hreatening abusive or defamatory considered to be bullyin		to, access or send anything that is:
√ 1	will repo	ort inappropriate behav	viour and inappropriate m	naterial to my teacher.
	I understand that my activity on the internet is recorded and that these records may be used in investigations, court proceedings or for other legal reasons.			
√	✓ I acknowledge that the school cannot be held responsible for any damage to, or theft of my device.			
✓ I understand and have read the limitations of the manufacturer's warranty on my device, both in duration and in coverage.				
✓ I	have re	ad the BYOD Student	Responsibilities docume	nt and agree to comply with the requirements.
		viewed the BYOD Dev outlined specifications		nent and have ensured my device meets the
Please pi	rint and	sign document, then re	eturn to the front office.	
(Print Stu		 me)	in the presence of:	(Print Parent/Caregiver name)

Parent/caregiver signature