

## **BYOD**

## **Acceptable Use Agreement**

Student and Parent/Carers are to sign the agreement below

## **Students:**

As a student at Maribyrnong College, I agree that I have read and understood the attached rules and will abide by the BYOD Acceptable Use Agreement.

I understand that any breach of these guidelines will result in being suspended from the school wireless network.

I will take proper care of my device and always store it in my locker with the approved College padlock.

I understand that if my device is damaged, stolen or lost it is my responsibility for any costs associated to have my device repaired or replaced.

Student Name:	Year Level
Student Signature:	Date:
Parent/Carer:	
I/We have read the BYOD Guide child and I agree that our respo	elines & Acceptable Use Agreement carefully and have discussed it with my nsibilities are clear.
I/We understand that if my chil replacement.	d's device is damaged, stolen or lost, we are responsible for the repair or
Parent Name:	
Address:	
Parent Signature:	