Appendix 4



Sylvania Heights Public School Bring Your Own Device (BYOD) Program Student Agreement

The Sylvania Heights Public School Bring Your Own Device (BYOD) program aims to enhance learning, wellbeing and educational attainment through quality use of technology. Sylvania Heights Public School does so with the expectations that students will make **safe**, **responsible and respectful** decisions with regard to their personal use of technology in line with the SHPS Student Use of Digital Devices and Online Services Procedures.

Students who wish to participate in the BYOD program must read this agreement in the company of an adult. This agreement must be signed and returned to the school. By signing at the bottom of this page, students agree to the following behaviours:

☐ I agree that my use of the Department's Internet will only be for learning purposes.		
I agree to only use my own portal/ Internet login details and never share these with others.		
☐ I agree to abide by the Departme	ent's security procedures and not attempt to bypass any hardware or	
software security features.		
☐ I agree to not use digital devices	to knowingly search for, link to, access or share anything that is: -	
offensive or inappropriate - three	atening, abusive or defamatory - considered bullying behavior.	
☐ I agree to report inappropriate b	I agree to report inappropriate behaviour and material to my teacher immediately.	
☐ I agree to stay safe by not giving	I agree to stay safe by not giving out or requesting personal information to or from anyone.	
☐ I understand that my activity on	the Internet is recorded and these records may be used in investigations,	
court proceedings or for other le	gal purposes.	
☐ I acknowledge that the school ca	I acknowledge that the school cannot be held responsible for any damage to, or theft of, my device.	
Repairs to and technical support	Repairs to and technical support for BYOD are the responsibility of the student.	
I agree that the use of digital dev	I agree that the use of digital devices for school activities is through direction from the teacher.	
I will treat mine and all school and student owned devices with respect.		
I agree that videos/ photographs can only be taken on school grounds with the permission of those		
involved, as well as my teacher, i	including at Blue Care.	
☐ I understand that my device is not to be used in the playground before the bell and during break times.		
I understand that digital devices and the Department Internet are only to be used for educational		
purposes, including during indoo	r breaks such as wet weather.	
☐ I agree to only use Air Play/Air Server and any other casting platforms upon direction from my teacher.		
I agree to only download and update applications at home.		
☐ I have read the student responsibilities for digital devices and agree that I will abide by them.		
I understand that breaching any aspect of this agreement will result in disciplinary action as per the		
Student Behaviour and Wellbein	g Policy, which may include a partial ban or full ban on using my device at	
school.		
Student Name:	Student signature:	
Parent Name	Parent signature:	