

University School
Bring Your Own Device (BYOD) Agreement

*Students **and** parents must read and sign this agreement. Return this form to the technology office in room 216 (or to Room 307 between 12-1) and bring your device for it to be configured for use on the school's network and the GoGuardian program.*

1. Students take full responsibility for their personal device/s.
2. Students are responsible for the proper care of their personal electronic device, including any cost of repair, replacement or any modifications needed to use the device at school.
3. Students must immediately comply with teachers' request to shut down their device or close the screen.
4. Any images, videos, or audio files recorded at school must not be transmitted or posted at any time without express written permission of the individual/s in the photo, video, or audio recording.
5. Students will use the school's secured wireless network. Use of personal carrier/service providers is not allowed while on campus.
6. Students will use the school's GoGuardian program.
7. USchool is not responsible for the security of the device (lost/stolen) or damages.
8. USchool is not responsible for the maintenance or repair of student personal devices.
9. USchool reserves the right to inspect a student's personal electronic devices if there is any reason to believe that the student has violated policies, administrative procedures, school rules, or has engaged in other misconduct while using their personal electronic device.
10. Violations of any policies, administrative procedures or school rules involving a student's personally owned device may result in the loss of use of the device in school and/or other disciplinary action.

Detach and complete the following form. Return the form to the technology office, Room 216, or to Room 307 between 12-1, and bring your device to be configured for the network and GoGuardian.

Student Name: _____

Grade: _____

Parents Name: _____

I understand and will abide by the BYOD guidelines and any violation may result in the loss of network and/or device privileges as well as other disciplinary action.

Student signature _____ Date _____

I have read and discussed these guidelines with my child. I understand my child will be responsible for abiding by the BYOD guidelines.

Parent/Guardian's Signature _____ Date _____