



Clifton State High School

BYOD Equity Device Agreement

Student Equity Devices are provided to students of families who meet the criteria for financial hardship and are unable to participate in the BYOD program.

The BYOD Equity Device Agreement form, as well as CORES agreement form must be signed and returned to the school and payment negotiated with the school office, before the device is issued.

The student and parent/caregiver must carefully read this charter before signing it. Any questions should be addressed to the school and clarification obtained before signing.

In signing below, we acknowledge that we,

- Accept and agree to all policies and agreements including the department's [Code of School Behaviour](#) and the School's [Responsible Behaviour Plan for Students](#) and [Information Communication Technology Usage Policy](#), these policies form part of this BYOD Equity Device Agreement and can be found on the school website.
- Acknowledge that I understand and agree with all of the conditions detailed in the BYOD Equity Device Agreement.
- Agree to the provision **medium** (access to social media sites through your own Internet Service Provider) internet filtering with the assignment of the device
- Understand that failure to comply with the BYOD Equity Device Agreement could result in recall of the device and/or loss of access for home use.
- Agree to contribute **\$90 per year** for my child to access the BYOD Equity Device program.
- Understand that the device is not covered by any warranty or insurance. This means that the cost of repairs due to accidental damage will be passed on to the parent. I also understand that the school may not undertake repairs that are not viable and the device may need to be replaced.
- Understand that the device will not be made available to the student until this agreement and the CORES agreement is signed and payment/payment plan has been made.

After reviewing and understanding the responsibilities outlined in the *BYOD Equity Device Agreement* section above and relevant policy documents, we: **agree to the conditions of the provision of a Clifton State High School Equity Device for our student to use.**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Student's name	Signature of student	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Parent / caregiver's name	Signature of parent / caregiver	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Designated school representative's name	Signature of school representative	Date

School Use Only (for take home option only)

Asset/Project ID:		Student Acknowledgement:	
Issue Date:		School Officer:	
		Returned:	Y / N date: