



Brooklyn School BYOD User Agreement

My child is able to bring a Chromebook device to school to use as a learning tool in the classroom.

Please tick

	I have read the Brooklyn School Digital Citizenship Agreement with my child and signed it.
	I have read the BYOD procedure.
	I understand that while the school supplies a secure, lock-up for valuables, my child is responsible for using this and the safekeeping of the device while in their care.
	I understand that charging the device will be done at home and the device will arrive at school fully charged and ready to use.
	I understand that the school will inform me of the process for downloading Apps but that I may be required to do this (or some of it) at home
	I confirm that the device is covered by the owner's insurance. The school cannot be held responsible for the loss or damage to the device.
	I understand that the device is used at the class teacher's discretion.
	I understand that the device will be used as a tool for learning.
	I understand that the internet will be accessed using the school Wi-Fi only. No 3G/4G access is permitted.

Device Information (Register Device)

The following information is used for device identification only.

Please complete in CAPITAL LETTERS and use a **slashed zero** for the number zero.

Name of Student: _____

Device Type: _____

Serial Number: _____

Signed: _____

Date: _____



In order to plan for the use of technology in the classroom, it is important we understand how you intend to respond to the Bring Your Own Device invitation.

The BYOD invitation is optional. Each Moa class has 13 devices provided by the school. This is approximately 1 device for every 2.5 students. Every BYOD device is beneficial, not just to the student bringing it but to those who do not bring a device as it increases access to the devices provided by the school.

To assist us with our planning, please indicate below your intention.

Name of student _____

Please Tick One	
	My child will bring a Chromebook
	My child will bring an iPad
	My child will make use of class technologies available at school
Tick Option 1 or Option 2	
Option 1	I give permission for my child to have a public blog reflecting the protocols outlined in the BYOD procedure. (Our Preference)
Option 2	I opt for my child to have a private learning blog only and for the following email addresses to be invited to have access... 1. _____ 2. _____ 3. _____ 4. _____ 5. _____

Please Tick If You Wish This to Occur or Leave Blank

I wish for all my child's emails to be forwarded to my email

_____ (Designated email)

Name: _____

Date: _____

Thank you

Liz Rhodes
Principal