

Parent Initial	Student Initial	Apex HS BYOD Agreement
		We understand that the student takes full responsibility for his or her device, and the school is not responsible for the security and safety of the student-owned device.
		We understand that the device must be in silent mode while on school campus and while riding a school bus.
		We understand that the device may not be used to commit academic dishonesty on assignments or tests or for non-instructional purposes.
		We understand that the student must have and utilize the WCPSS issued email account and access only content on the device or internet sites which are relevant to the curriculum.
		We understand that the student must comply with teachers' requests to shutdown the device, as teachers will not touch the device but absolutely reserve the right to ask student to shut off device.
		We understand that the student acknowledges that the school's network filters will be applied to one's connection to the internet, and the student will not attempt to bypass them.
		We understand that any attempt by the student to bring on premises or infect the network with a Virus, Trojan, or program designed to damage, alter, destroy, or provide access to unauthorized data or information is in violation of the Board Policy 3225 - Technology Responsible Use and will result in disciplinary actions.
		We understand that processing or accessing information on school property related to "hacking," altering, or bypassing network security policies is in violation of Board Policy 3225 - Technology Responsible Use and will result in disciplinary actions.
		We understand that student printing from personal devices will not be possible at school, and while at school, all devices will utilize the WCPSS BYOD wi-fi.

I understand and will abide by the above guidelines. I further understand that any violation is unethical and may result in the loss of my network and/or laptop privileges as well as other disciplinary action.

Student Printed Name _____ **Date** _____

Student Signature _____

Parent Printed Name _____ **Date** _____

Parent Signature _____