

Bring Your Own Device (BYOD) Policy Agreement Form

A World of Opportunity



We confirm that we have read and fully understand the enclosed **Kormilda College BYOD Policy** and **Device Specifications and Minimum System Requirements** guide.

We agree that the policy has been accepted.

When using the BYOD device on the network and Internet, the student named here agrees to abide by the **Kormilda College Student Acceptable Usage Policy Agreement** and **Kormilda College BYOD Policy** and understands that any breach of these policies will incur the sanctions as outlined in the policy.

Furthermore,

I understand that:

Use of any personal computer or device that has been connected to the College network will be used in agreement with the policy.

Breach of the Policy

We understand that:

- Use of student's device may be suspended or revoked if the policy is breached.
- Any devices that have been configured to connect to the College network will have the connectivity revoked if the policy is breached.
- Any breach of the policy will be raised with parents/guardians to discuss the breach and the devices access will remain suspended until an outcome has been agreed.

Acceptance of Kormilda College BYOD Policy

By signing and returning this document to the College, the agreement will commence from the date received and the supplied device will be activated for use in line with this agreement.

| | |
|--------------------------|--|
| Student Name | |
| Year Level | |
| Student Signature | |

As the parent/guardian, I have read and discussed the policy with my child and confirm that we both understand this policy and will comply with it:

| | |
|---|--|
| Parent/ Guardian's Signature | |
| Date | |

This agreement needs to be signed and the original returned to the College as part of the acceptance of the agreement.

Office Internal Use only

Agreement processed by _____

Date Agreement Received _____ Account activation authorised Yes No