



# BYOx Responsible Use Agreement



The following is to be read and completed by both the STUDENT and PARENT/CARER:

- I have read and understood the BYOx Charter and Hervey Bay State High School's Responsible Behaviour Plan for Students. These documents are available from [www.herveybayshs.eq.edu.au/Ourschool/Rulesandpolicies](http://www.herveybayshs.eq.edu.au/Ourschool/Rulesandpolicies)
- I agree to abide by the guidelines outlined by both documents.
- I understand and accept that Windows and Apple devices are the only compatible devices under the BYOx program.
- I am aware that non-compliance or irresponsible behavior, as per the intent of the BYOx Charter and the Responsible Behaviour Plan, will result in consequences relative to the behaviour.

Please print names and details:

Student's Name: \_\_\_\_\_ Year: \_\_\_\_\_ ID No: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Carer's Name: \_\_\_\_\_

Parent/Carer's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## ADMINISTRATION PROCESSING (OFFICE USE ONLY)

Please list the make and model of device (s) to be connected under this agreement.

COMPLETED

FORM RETURNED & FILLED IN

\$25 ACCESS FEE PAID (annual access fee)

OFFICE SIGNATURE: \_\_\_\_\_

## ICT STAFF PROCESSING (OFFICE USE ONLY)

1. \_\_\_\_\_

COMPLETED

2. \_\_\_\_\_

DATA RECORDS AMENDED

3. \_\_\_\_\_

NETWORK PERMISSIONS ADDED

OFFICE SIGNATURE: \_\_\_\_\_

**RETURN COMPLETED FORM & PAYMENT TO STUDENT SERVICES**

**TO HAVE THEIR DEVICE ONBOARDED (JOINED TO THE NETWORK), STUDENTS WILL NEED TO TAKE THEIR DEVICE TO THE EHUB DURING RECESS BREAKS ONLY AND SEE THE TECHNICIAN**