**DALHOUSIE REGIONAL HIGH SCHOOL**

500 CANADA GAMES DRIVE

DALHOUSIE N.B.

E8C 2P5

**TELEPHONE: (506)684-7553                      PRINCIPAL:  Dawn Beckingham**

**FAX:  (506)684-7602                      VICE-PRINCIPAL:  Jonathan Watts**

**Bring Your Own Device (BYOD) Agreement**

Any parent permitting their child to use a personally owned wireless device in accordance with this agreement on Dalhousie Regional High school property must read, sign, and return the bottom portion of the agreement to the school.

* The use of personal electronic devices during the instructional day is to support student learning and educational activities; any personal use is limited to before school, breaks and after school.
* At all times, the student is responsible for the proper care of the security or condition of the personal device.
* The school or district personnel are not responsible for the security or condition of the student’s personal device.
* The student may only use personal technology devices in class with the consent and under the direct supervision of a faculty member.
* Personal electronic devices must not disrupt the learning of others.
* The student must comply with the teachers’ request to verify connection to the wireless network, content being viewed, refrain from using a device, or to power down (turn off) the device.
* The student may not use their device to record, transmit or post photos or videos of a person without their knowledge and consent. Images, videos, and audio files recorded at school may not be transmitted or posted at any time without the expressed permission of a teacher or administrator.
* Violations may result in the loss of privilege to use personal technology in school and/or disciplinary and legal action as appropriate.
* The school reserves the right to confiscate and/or inspect personal technology devices if there is reason to believe that it was used to violate our policies, administrative procedures, school rules, or for general misconduct (policy 311).
* If device is confiscated for serious reason or for continual misuse, the home will be notified and the device will remain at school until a parent can come pick it up.

*Detach and retain the top portion. Please return the completed bottom section to school.*

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Print student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand and agree to abide by the BYOD agreement and applicable policy and guidelines. I further understand that violations may result in the loss of my network and/or device privileges, and possibly other disciplinary or legal action.

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Student’s signature Date

As a parent, I understand that my child will be responsible for abiding by the above policy and guidelines. I have read and discussed this with her/him and she/he understands the responsibility of using a personal device in school. I understand that in the event of a violation to this agreement, the device may be confiscated and inspected.

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Parent’s signature Date