



BYO iPad Program

Student Participation Agreement 2017

General Use

1. I understand that I **bring my personal iPad to school each day**.
2. I will ensure the **iPad is charged** at the beginning of each school day.
3. I will **leave the iPad charger at home** unless directed to bring it to school.
4. I will hold the **iPad with two hands** when carrying it and **will walk** with it at all times.
5. I will **ensure my iPad is kept in my school bag on my trip to/from school**.
6. I will **keep food and drinks away** from the iPad at school.
7. I will **immediately report any accidents or breakages** to my parents and teachers.

Content

1. I will use the iPad only to **support my school learning program** whilst at Robina State School.
2. I permit my teachers and parents to **perform checks** to monitor that I have not installed illegal / unsuitable software applications and content and to check the websites which I visit.
3. I understand there will be **consequences** for inappropriate use including, but not limited to, loss of privilege of using the iPad for a period of time.
4. I am responsible to ensure my iPad is **backed up**.

Safety and Security

1. Whilst at school, I will only connect my iPad to Education Queensland's Managed Internet Service. I am not permitted to access 3G Internet at school.
2. Whilst at school, I will **only go to websites at school** that support my learning activities.
3. I will only use my school email account for mail related to my learning
4. I will be **cybersafe** and **cyber smart** when using the internet.
5. I will demonstrate **etiquette** when using my iPad / other equipment with regard to other people.
6. I will only take photos, on my iPad, when instructed by my teacher.
7. I will use my iPad lawfully and in accordance with the *Appropriate Use/Behaviour of School Network* guidelines regarding **ethical use** of equipment, technology, use of legal software, use of the Internet and the protection of personal data.
8. For security reasons, I am **not to share account names and passwords** with anyone unless requested by Robina State School staff when servicing the iPad.
9. I am **responsible for the security and use of my iPad while at Robina State School**. Lockable storage will be provided for students to place their equipment during lunch and play breaks.
10. I understand it is my responsibility to take care of my iPad and act in a manner that minimizes the risk of damage or loss including only using it in approved locations and at approved times.

I understand if the above conditions are not followed, I may lose my privilege to use my iPad at Robina State School for such time, determined by the school.

Name of Student: _____ Student Signature: _____

Name of Parent: _____ Parent Signature: _____

Date: _____

Authorised at Robina State School by:

Principal Name: _____ Principal Signature: _____

Date: _____