



STUDENT'S SURNAME: \_\_\_\_\_

STUDENT'S FIRST NAME: \_\_\_\_\_

YEAR LEVEL IN 2024: \_\_\_\_\_

## BYOD eLearning Agreement – Parent/Carer Consent

This form must be signed and returned to the school before a laptop can be connected to the school network.

The student and, parent or guardian must carefully read the agreement details before signing it. Any questions should be addressed to the school and clarification obtained before this form is signed.

In signing below, I acknowledge that I,

- accept all policies and guidelines as per the Responsible Behaviour Plan for Students.
- understand my responsibilities regarding the use of the laptop and the internet.
- acknowledge that I understand and agree with all of the conditions detailed in the 'Agreement Details' of the Program Information Booklet
- understand that failure to comply with the 'Agreement Details' could result the laptop not being permitted to connect to the school's network.
- agree to pay **the BYOD \$30 technology connection service** for my child to participate in the eLearning program. This is an annual charge.
- agree to meet the minimum device specifications as recommended by the school
- agree to maintain the recommended anti-virus software
- *agree to participate in the Student Resource Scheme and maintain regular payments*

_____	_____	_____
Student's name	Signature of student	Date
_____	_____	_____
Parent / guardian's name	Signature of parent / guardian	Date

<b>I wish to pay by:</b>
<input type="checkbox"/> BPoint <i>(please contact the school for an invoice)</i>
<input type="checkbox"/> Credit Card <i>(please pay in person at the school office)</i>
<input type="checkbox"/> EFT notification by email to <a href="mailto:accounts@proserpineshs.eq.edu.au">accounts@proserpineshs.eq.edu.au</a> <i>BSB 064 816 A/c No. 0009 0131</i> <i>Description: Student Name BYOD</i>
<input type="checkbox"/> Cash to be submitted with form
<input type="checkbox"/> Cheque to be submitted with form

### OFFICE USE ONLY

Accounts Receivable		Date	
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