JOHN FORREST Secondary College
INDEPENDENT PUBLIC SCHOOL

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BRING YOUR OWN DEVICE (BYOD)
STUDENT/PARENT MEMORANDUM OF AGREEMENT

Connection and Use of Student Owned Device on the John Forrest Secondary College Network

PARTIES TO THE MEMORANDUM

Student's Full Name: _____

Parent/Guardian's Full Name: _____

Device Make/Model: _____

Preamble

This memorandum relates to the connection and use of a student owned device at John Forrest Secondary College (JFSC). It describes the terms of the provisions including level of service and scope of services agreed to by JFSC, the student and the student's parent/guardian.

Conditions

The solution is supplied by JFSC to the student, based upon the following Agreement:

1. The student must take all reasonable care to prevent against any form of damage and loss of the student owned device.
2. The student will abide by all conditions outlined in the *BYOD User Policy and Information* and *Students Online – Acceptable Usage Policy* (available on the college website).
3. The student and their parent/guardian will be solely responsible and legally accountable for any data stored or installed on the student owned device.
4. The student owned device and any software installed will be provided by the parent/guardian and or student.
5. Student owned devices can only be connected to the college's wireless network.
6. The Department strongly recommends that:
   - (a) Student owned devices are installed with anti-virus protection which is either current or the version immediately prior to the current version.
   - (b) Student owned devices are installed with the recent release of the anti-virus definitions files (one of the most recent four (4) released definitions).
   - (c) Student owned devices have operating system patches which are within seven (7) days of the vendor's release date.
   - (d) Student owned devices are enabled to receive auto-updates from the software vendor.

Signed *(Student)*: _____ **Date**: _____

Student's Full Name: _____

Signed *(Parent/Guardian)*: _____ **Date**: _____

Parent/Guardian Full Name: _____

TO ENABLE CONNECTION TO THE COLLEGE NETWORK
Please take this completed and signed *Student/Parent Memorandum of Agreement* and your device to the IT Technician in the college Library.

Connection to Network - For Office Use Only

Signed: _____ **Date:** _____
(IT Technician)

Entered on SIS: _____ **Date:** _____
(Enrolment Officer)