



Atlantic Shores Christian School

Privately Owned Electronic Devices

2017-2018 Permission Form

I authorize, _____, to bring his/her Privately Owned Electronic Device to school with the understanding that it is to be used as a tool for instruction **only as a part of the Bring Your Approved Device (BYAD) educational initiative** and that my child will comply with ASCS Student Acceptable Use Acknowledgement.

In signing below, I acknowledge that I have received, read, understand the intent of the BYAD instructional initiative, and on behalf of myself and my child, agree to abide by ASCS Student Acceptable Use Acknowledgement. I further acknowledge that I have reviewed this policy and the policies with my child. I understand and agree that Atlantic Shores Christian School (ASCS) is not responsible for any damage or loss associated with my child's Privately Owned Electronic Device, nor is it responsible for any costs incurred relating to the downloading of content to the device or access to any content providers through the device. I also understand that bringing a Privately Owned Electronic Device to school is a privilege and may be terminated at any time. I further acknowledge that this privilege is designed for educational purposes only and that violation of the Privately Owned Electronic Device policy as a part of the BYAD instructional initiative may result in my child losing the privilege to bring his/her Privately Owned Electronic Device to school for a length of time commensurate with the nature of the violation and other school discipline.

I also recognize that it is impossible for ASCS staff to monitor all activity on personal devices, and the student, parent and/or guardian will not hold ASCS, the School Board, its members, or any individuals employed or retained by ASCS responsible for damages related to my child's use of the Privately Owned Electronic Device or for content viewed by any student on the Privately Owned Electronic Device, including via a personal connection (3G, Sprint, etc.).

Parent/Guardian Name: (Print) _____

Parent/Guardian Signature: _____ Date: _____

Phone: _____ Email: _____

Student Agreement

I have received, read, understand and agree to abide by the ASCS policy and regulations outlined in the Parent-Student Handbook. I understand that a violation of these policies and/or regulations may result in losing the privilege to bring the Privately Owned Electronic Device to school for a length of time commensurate with the nature of the violation and/or other school discipline.

Student Name: (Print) _____

Student Signature: _____ Date: _____

Personal Device(s):

Make/Model: _____ SerialNumber: _____

Make/Model: _____ SerialNumber: _____

Make/Model: _____ SerialNumber: _____