BYOD Teacher Agreement Form:

The following agreement form outlines your requirements and responsibilities when initiating a Bring Your Own Device ("BYOD") program within your classroom for student use. Please complete this form and return to "Dix Training Center - ATTN: Kevie Loethen" to be filed.

REQUIREMENTS:
1. All students participating in the BYOD program must have a signed JCPS district parental permission form prior to bringing any personal devices on district property during school hours.
2. All signed JCPS district parental permission forms must be maintained by the participating classroom, by one of the teachers in a "Team" participating in BYOD, or the administrative office so that it can be referenced.
3. Any use of BYOD technology outside of the classroom must have written approval attached to this form by the building's administrator that outlines the scope and purpose.

RESPONSIBILITIES:
1. It is the teacher's responsibility to ensure all BYOD technology used by students adheres to JCPS Board and the parental permission form policies.
2. It is the teacher's responsibility to manage classroom use of BYOD and ensure all students participating stay on task with those devices.
3. It is the teacher's responsibility to report any potential misuse of the BYOD technology to the appropriate district administrators, if they suspect it may affect district or other student resources.
4. The teacher is not to handle any student BYOD technology in an effort to assist in its use or to offer any suggestions that may affect the environment or performance of those devices. Students are responsible for the understanding and usage of their own personal devices. No district technology personnel will be contacted to assist in troubleshooting these devices.

SCOPE:
Devices to be used: ☐Tablet ☐Smart Phone ☐Laptop ☐IPod ☐Camera ☐Other _____

Outline for intended use of BYOD technology:
_____
_____
_____

Areas approved for BYOD use: Room _____ Other _____

Dates for BYOD program: From ____ / ____ / _____ to ____ / ____ / _____

Teacher Name (printed) _____

Teacher Signed _____ date _____

Building Administrator (printed) _____

Building Administrator Signed _____ date _____