

BRING YOUR OWN DEVICE POLICY

Acknowledgement Form

This Acknowledgement Form is to be completed by Parent / Legal Guardian.

I / We, the parent(s) / guardian of _____,
a student of _____, [insert name of Location]
have received, read, understand, and discussed with my child the Bring Your Own Device (BYOD)
Policy. By signing the Acknowledgement Form, I / we agree to all its terms.

Printed name of Parent(s) / Guardian

Printed name of Student

Signature of Parent(s) / Guardian

Signature of Student

Date

Date

