

**Acceptable Use of B-12 Learning Technologies Policy**

**AGREEMENT FORM**

It is a Department of Education requirement that all students and their parents/carers sign the **Acceptable Use of B-12 Learning Technologies Policy Agreement Form** before the student is permitted to access learning technologies on any Departmental School site. Once signed and returned to the College, the document is filed in the student's records and acknowledged in the College's database. (Please allow 48 hours for processing).

I have read and understand the **B-12** **Learning Technologies Policy** (on the Avenues College website) and understand the Learning Technologies User Rights and Responsibilities.

I understand and accept the responsibilities outlined in this policy.

I understand that this agreement remains valid and in place for the duration of my child's enrolment at Avenues College or until it is reviewed.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Year Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Date of Birth: \_ \_ / \_ \_ / \_ \_ \_ \_

Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_ \_ / \_ \_ / \_ \_ \_ \_

Name of Parent/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_ \_ / \_ \_ / \_ \_ \_ \_