## HULL PUBLIC SCHOOLS STUDENT PLEDGE FOR MOBILE COMPUTING DEVICE USE

- I will show respect for others and stop and think before communicating with my device.
- I will secure my device while it is unattended.
- I will never loan out my device to other individuals.
- I will know where my device is at all times.
- I will charge my device daily.
- I will keep food and beverages away from my device.
- I will not disassemble any part of my device or attempt any repairs.
- I will protect my device by caring for it appropriately.
- I will not place decoration (such as stickers, markers, etchings, etc.) on my device.
- I will not deface the serial number or asset tag number on any device.
- I understand that the data on my device is not confidential.
- I understand that my device is subject to inspection at any time without notice as it is the property of the Hull Public Schools.
- I will follow the policies outlined in the Mobile Computing Device Acceptable Use Policy while at school, as well as outside of the school day.
- I will be responsible for all damage or loss caused by neglect or abuse.
- I agree to return the device, power cords, and any issued accessories in good working condition at the end of every school year.
- I will demonstrate digital citizenship by exhibiting responsible behavior with regard to my technology use.

68

Adoption: September 8, 2014 First Reading: April 10, 2017 Second Reading: April 24, 2017 Adoption: June 19, 2017 Proposed reconsideration: June 2022

Hull Public Schools

File: IJNDC-E2

## MOBILE COMPUTING DEVICE ACCEPTABLE USE AGREEMENT SIGNATURE PAGE

I understand and agree to the stipulations set forth in the above document (Mobile Computing Device Acceptable Use Policy) and the HPS Internet Use Policy in the Student Handbook.

Student Name:	
Student Signature:	Date:
Parent Name:	
Parent Signature:	Date:

\_I want to opt out of my student taking the mobile computing devicehome.

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## STUDENT HANDBOOK SIGNATURE PAGE

Please sign the following statement. All students must submit this form to their respective homeroom teacher before Monday, September 11, 2023.

- I have read the Lillian M. Jacobs School Handbook and agree to obey the rules, expectations, regulations, and policies of the school.
- I have read "The Internet Use Policy" and agree to obey the rules, regulations and policies of the school.
- I have *read and signed* the "Hull Public Schools Student Pledge for Mobile Computing Device Use."
- I have read the Bus Conduct/Transportation policy and agree to obey the rules, regulations and policies of the school.
- This serves as your annual notice of Civil Rights notice of grievance officers and grievance procedures, bullying prevention and intervention plan, physical restraint procedures, and code of conduct.
- On occasion, photographs are taken of students working on classroom projects, during special events, or for the school or local newspaper(s). I give permission for my child to be photographed or videotaped either by the school for the school newsletter and various news agencies who may be doing stories about the Lillian M. Jacobs School. Pictures may be published in local newspapers and on the school website or social media sites. If you do not want your child's photograph to be used, please check off the appropriate box below your signature.

Student:	Grade <u>:</u>	
Teacher's Name:		
Student Signature:	Date:	
Parent/Guardian Signature:	Date:	
Address:		
Primary Telephone:	Work Telephone:	
Parent/Guardian Cell phone:		
Parent/Guardian Email Address:		

□ I DO NOT WANT MY CHILD PHOTOGRAPHED IN SCHOOL. Only check this box if you <u>do not</u> want your child included in school photographs or videos of classroom activities and events that may be included on the website, social media or in newspaper articles.