BYODx Equity Device Application Form

Dear Parents / Caregivers,

The purpose of the BYODx Equity Policy is to establish the framework for the BYODx program to provide this for all students, irrespective of their families' financial circumstances.

We recognise that the BYODx program raises a financial cost on students and their families in supplying a device. At the same time, the program can only function if all students have access to appropriate technological resources in all of their classes.

From 2025, the Equity Program will include a $100 yearly hiring fee. The hiring fee can be paid in termly instalments of $25 per term.

Please select your preference from the following options:

☐ I will provide my own device for my child

☐ I do not have the resources to supply a device for my child at this time and would like to **hire** a device through the BYODx equity program for **$100 a year.**

I have read the responsibilities listed on the following page and I have read and agree to the indemnity information.

Where a loan laptop is damaged due to negligence or not returned, the parent/caregiver will be contacted and issued an invoice to pay the repair or replacement cost. This arrangement allows student from families in financial hardship to access a laptop until circumstances improve and a personal laptop is purchased.

Please complete the form on the following pages and return to the school office.

Contact Details:

Name of Student	
Address	
Year Level	
Reason for Requesting Equity Device	
Name of Parent/Guardian	
Telephone Number of Guardian	
Email of Guardian	

Indemnity

Fair wear and tear excepted, and for the duration of this transfer, I/we agree to indemnify Department of Education against loss or damage from any cause whatsoever, to the equipment detailed herein and, in the event of damage to restore and deliver such equipment to Department of Education, in the condition in which it was received, or to replace the damaged equipment with other equipment of equivalent functionality.

• If the hire device is broken, I will organise through Loganlea State High School for the device to be repaired: **Screen $217.80, Cover $15, Keyboard $45, Battery $66.67, Charger $32.88. These fees are in addition to the $100 hiring fee.**

• **The $100 hiring fee is to be paid by Week 3, Term 1 in full unless a payment plan has been identified.**

• If the device is stolen or broken beyond repair, I will pay Loganlea State High school **$250.00** to replace the device, knowing my child will receive a new long-term hire agreement.

• When my child departs or graduates Loganlea State High School, they will return the laptop to the school. I understand that failure to do so will result in a **$250 charge** and that if payment is not received the device will be reported stolen and referred to the Police.

• The device is to be returned at the end of each school year.

Signature of parent/guardian _____ **Date ___ / ___ / ____**

Equity Laptop - Student Agreement

Students must read and sign the Equity Laptop Student Agreement in the company of a parent or caregiver unless otherwise directed by the principal.

I agree that I will abide by the school policy below and that:

• I will use the laptop and the DoE's Wi-Fi network for learning.

• I will sign out the laptop at the start of the year and return it by the end of the year.

• I will use the laptop during school activities at the direction of the teacher.

• I will not attach any personal equipment to the laptop without permission from the school.

• I will use my own school portal log-in details and will never share them with others.

• I will stay safe by not giving my personal information to strangers.

• I will not hack or bypass any hardware and software security implemented by the DoE or the school.

• I acknowledge that I will be held responsible for any damage to, or theft of the laptop. I understand that I may be liable for the cost of repair or replacement. In the event of damage or theft I will report this the HOD of IT immediately.

Student Name	in the presence of	Parent/caregiver name
Student signature		Parent/caregiver signature

Year _____

Date _____