**Eastertoun Primary and Nursery School**

**Anytime, Anywhere Learning**

**Responsible User Agreement for use of own devices in school**

* I will be responsible for the care, safety and use of my mobile device at all times. This includes my journey to and from school and when on the school premises.
* I will put my device in the designated place within my classroom and not take it back until told to do so or at the end of the day.
* I will ensure that my device has a password on it to prevent others from using it.
* I will only use my device for learning activities approved by the teacher.
* I will keep my name on my device.
* I will protect my device with a screen protector and case.
* I will tell a member of staff if I find a page, message or picture which makes me feel uncomfortable.
* I will ensure that I log off any shared device and not charge my own device in school.
* I will not communicate with others using threatening, rude or swear words or in a way which makes them feel uncomfortable.
* I will remember that electronic mail (e mail) is not guaranteed to be private.
* I will ensure my device is at a noise level as directed by my teacher.
* I will not respond to any text message or call I receive when I am in class.
* I will not take or post pictures, personal information or videos of myself or others through any form of electronic communication. This includes all pupils and staff.
* I will respect others’ devices and take responsibility if sharing my device with others.
* I accept that my school and West Lothian Council are not responsible should my device get lost, stolen or broken.
* I accept that if I do not follow the ‘Responsible User Agreement’ detailed above, the school may withdraw the right for me to use my mobile device as a learning tool, take Golden time from me or take house points from me.

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**AAL Responsible User Agreement**

Pupil’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_

Pupil’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Carer’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Carer’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_