NORTHAM SENIOR HIGH SCHOOL

INFORMATION COMMUNICATION TECHNOLOGY POLICY AGREEMENT

Student's name:	Year:	
workplace. This policy is designed to	vare responsible and accountable for the assist students in their preparation for the Information Communication Technology ies and access to appropriate sites.	ne world of work and to educate the
 Teacher's permissions must leaders on internet sites Students are responsible for Access to inappropriate internet 	e at Northam Senior High School is a PRING be granted prior to internet access. Is is to be conducted under the guidance of ensuring that internet access is both educated sites e.g. games, chat rooms; topics of the country of the c	of the classroom teacher. Icational and appropriate.
may be imposed in consultat Deputy Principal and ICT Mar	riate sites will be referred immediately to ion with the students, parents, classroom nager.	n teacher, Head of Department,
prior to email access.	retion of the classroom teacher and teacl n staff, music or video may not be stored	
LAN or network games are stThe sending/receiving of inage	rictly prohibited. opropriate emails is <u>STRICTLY PROHIBITE</u>	<u>D.</u>
inappropriate material will be	ails without teacher consent, or the send e considered a breach of the IT Policy and	d dealt with accordingly.
 Students who have had acces to use alternative sources to due date. 	ss to their ICT account disabled or are bar complete class work, homework assessm	nned from internet use are required nent tasks, assignments, etc. by the
a result. Students who suspec their teacher and make arran	word to another student may be liable fo of their password is being used by others agements for a new password to be issue all files and internet sites accessed via the	must report this immediately to d.
5 Students are responsible for a	an mes and internet sites accessed via the	eir account.
I have read, understood	d and fully support the Northam Senior I	High School ICT Policy
	Student Signature:	•

If you are completing this form online and are unable to sign this form, please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.

Parent/Guardian Name: ______ Parent/Guardian Signature: _____

Date: ____