MANSFIELD SHS MANAGED LAPTOP PROGRAM PARTICIPATION FORM 2024



STUDENT DETAILS
First Name:
Last Niama
Last Name:
Year Level in 2024:
LAPTOP - ACER TRAVELMATE SPIN P414 - \$1600 INCL. GST
Intel Core i5-1135G7
16GB RAM
256GB SSD
14" Touch Screen & Stylus Pen
3yr Warranty
3yr Accidental Damage Protection
CompuTrace
Protective Case
INTERNET FILTERING LEVEL FOR HOME (PLEASE TICK CHOICE)
☐ Medium - A medium level of filtering provides a less restrictive level of protection while at home. Students with this level
can access a wider range of websites at home which includes, but is not limited to, Social Media Sites (Facebook, Twitter,
and YouTube) and mature content.
☐ High - A high level of filtering at home provides students restricted access to the internet. Websites and web applications
that are blocked at school are also blocked at home including social media sites, such as Facebook, Twitter, and YouTube.
SCHOOL MANAGED LAPTOP PROGRAM PARTICIPATION AGREEMENT (PLEASE TICK)
☐ I have read and understood the School Managed Laptop Program Participation Agreement and agree to abide by the
guidelines and agree to pay the participation fee of \$1600 either up front or via a pre-payment plan agreed to with the
school. I understand any payment plan must be paid in full before the laptop is issued. I understand I am entering into a
contract the laptop remains the property of the school until the contract ends.
PARENT / GUARDIAN DETAILS
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First Name:
Last Name:
Parent / Guardian Signature: Date:/
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RESPONSIBLE USE AGREEMENT FORM 2024



The goal is to ensure the safe and responsible use of services available to students through the provision of clear rules and guidelines. The student must understand that the right to use a device at school is conditional on the student abiding by the Charter. The device is primarily provided for an educational purpose. It is not provided for a recreational purpose. Failure to use the device in a responsible way may result in the student losing the device or losing the right to use the school network. When at school the student's use of their device, in or out of class, is determined by a teacher. At all times the student is obliged to follow a teacher's instructions regarding the student's use of their device. Responsible use requires that the student follows the rules for the use of the device in the Mansfield State High School Handbook.

BREACH OF RESPONSIBLE USE

STUDENT DETAILS

Students will be held responsible for any actions caused by other persons using their account with the student's knowledge. The school reserves the right to limit access of devices to the intranet, internet, email, or other network facilities to ensure the security of the network and to provide a safe environment for all. The misuse of devices may result in disciplinary action which is not limited to the withdrawal of access to school services.

First Name:	
Last Name:	
Year Level in 2024:	
Responsible use agreement I have read and understood the School Managed Laptop Program Participation Agreement. I agree to abide by the conditions described herein. I am aware that a breach of this agreement may result in the withdrawal of the device school network service or other consequence proportionate to the breach. I agree to: Read and abide by the 1-to-1 Technology Program Student Charter. Participate in the 1-to1 Technology Program induction.	
 □ Recognise that the device is for education. □ Look after the device and transport in the protective case. □ Ensure my login account will not be shared with another student for any reason. □ Practice responsible use and online safety. □ Protect my password. □ Regularly back up my data. □ Make sure my device is always fully charged at the start of each school day. □ Abide by intellectual property and copyright laws. □ Not bypass security controls on the school network. 	
Student Signature: Date:/	
PARENT / GUARDIAN DETAILS	
First Name:	
Last Name:	
I agree to: ☐ Read the 1-to-1 Technology Program Student Charter. ☐ Recognise that the purpose of the device is for education. ☐ Encourage responsible use and online safety.	
Parent / Guardian Signature: Date:/	