



Ogden Preparatory Academy

Staff Acceptable Use of School Electronic Resources Acknowledgement of Receipt and Understanding

School Issued Device Acceptable Use Agreement

I hereby certify that I have read and fully understand the contents of the School's policies regarding use of the School's electronic resources. Furthermore, I have been given the opportunity to discuss any information contained therein or any concerns that I may have. I understand that my employment and continued employment is based in part upon my willingness to abide by the School's policies, rules, regulations and procedures. I acknowledge that the School reserves the right to modify or amend its policies at any time, without prior notice. I acknowledge that these policies do not create any promises or contractual obligations between the School and its employees and that my employment with the School continues to be at will. My signature below certifies my knowledge, acceptance and adherence to the School's policies, rules, regulations and procedures regarding the use of its electronic resources. I acknowledge that violation of any of these policies may be grounds for discipline, up to and including termination.

School Issued Device Serial Number

Employee Signature

School Cart # (N/A if no cart assigned)

Employee Name

Date

OPA Personal Technology Procedure (BYOT) Agreement Acknowledgement and Declaration

I hereby certify that I have read and fully understand the contents of the School's policies regarding use of personal electronic resources. Furthermore, I have been given the opportunity to discuss any information contained therein or any concerns that I may have. My signature below certifies my knowledge to the School's policies, rules, regulations and procedures regarding the use of personal electronic resources.

Employee Signature of Acknowledgement

I would like to participate in the Bring Your Own Technology (BYOT) Program at Ogden Preparatory Academy.

Yes / No