Device Permission Form



Frederick County Public Schools 191 South East Street Frederick, Maryland 21701

FCPS Form 400-18F Regulaition 400-18 March 2023

I,, agree to all	low
Name of Parent/Legal Guardian to bring a personally owned computing/networking devic use in Frederick County Public Schools (hereafter "FCPS	· · · · · · · · · · · · · · · · · · ·
My signature below acknowledges that I agree to allow FCPS is not responsible for any device or data loss, theft replacement or repair incurred during the school day or this program. I understand that FCPS staff will be una student owned devices.	t, damage or other associated costs of at home as a result of participation in
FCPS uses technological measures such as filtering to p students' ability to access harmful Internet sites from network, but only when this equipment is used in school of cellular networks does not provide the same measures of FCPS network (not private cellular service) for Intern Students (and others) should have no expectation of private	any device connected to the FCPS on the FCPS network. Access through filtering. Students should only use the et access while on FCPS property.
I understand that the purpose of allowing my child to uteacher-approved activities and for educational reasons instructional purposes, such as keeping track of classic related class activities. Consequences will be imposed if governing student behavior (Regulation 400-08) and according resources (Regulation 400-73).	s in support of FCPS curriculum for com assignments, research and other in accordance with FCPS regulations
I understand under Maryland wiretap and privacy la record others, and therefore it is my responsibility to di child's device during the school day or at school related a	isable the listening component of my
Signature of Parent/Legal Guardian	Date
Student's Acknowledgement: By signing this Device Permission Form, I acknowledge that I will utilize the device(s) for instructional purposes and in accordance with Board of Education policies and FCPS regulations while at any FCPS school or on the FCPS network.	
Signature of Student	 Date