



**Williamsburg-James City County Public Schools**  
**School Board & Central Office**  
 P.O. Box 8783 • Williamsburg, VA 23187  
 Phone: (757) 603-6400 | [wjccschools.org](http://wjccschools.org)

<u>Parent/Student</u>	<u>Office Use Only</u>
Graduation Year:	

**Williamsburg-James City County Public Schools**  
**Bring Your Own Device Program Agreement**  
**Signature Page**

I, the parent or guardian of \_\_\_\_\_ (student's name), the minor student who has signed, along with me, this bring your own device agreement, understand that the minor child for whom I am responsible as indicated above and by our signatures below, must adhere to the terms of this agreement. I understand that by allowing the minor child named above to bring a privately owned electronic device to school that I accept sole responsibility for any loss, damage, or theft of said device. I also understand that WJCC reserves the right to examine privately owned electronic devices and search the contents of said device if there is reason to believe that school division policies or local, state and/or federal laws have been violated.

I also understand, and have conveyed such to the minor child named above, that all rules, regulations, and instructions provided by WJCC staff regarding this privilege shall be followed.

Parent or Guardian Name (Please print): \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name (Please print): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_