## SAINT JOSEPH CATHOLIC SCHOOL

## Faith Centered. Future Focused.

Dear Parents,

Below, please find our cell phone/electronic devices policy. Please review the policy. If your child needs a cell phone for after school use, please fill out this permission form. This form must be sent to school on or before the first day your student will be bringing a cell phone to school. All students must follow this policy. Any student found breaking this policy will lose his/her cell phone privileges **for the entire school year**. We appreciate your cooperation with this policy.

## **Electronic and Telecommunication Devices Policy**

Display or use of any electronic or telecommunication device during the school hours by SJS students is prohibited. The term "devices" includes but is not limited to:

- Smartphones
- Electronic equipment designed to operate with equipment used in school
- Smartwatches
- Music devices

Students that need to have the use of a cellphone/smartwatch after school MUST check the phone/watch with their teacher in the morning or upon arrival and pick it up at the end of the day. Students that are found in possession of a phone/watch during school hours will lose their privileges **for the entire school year**. Should your child receive a phone/watch during the school year, please complete the attached form and return it to the office. Students are not allowed to have any phone/watch privileges without this permission slip. Again, we appreciate your cooperation with this policy.

| I   | , acknowledge that my child  |                |
|---|--|----------------|
| will be carrying a cell phone to s<br>with the homeroom teacher in t<br>at the end of the day. I am fully<br>watch at the office and is found | chool. I realize that this cell phone/smart watch needs to be checked in the morning or upon arrival. It will be returned following announcements aware of the policy that states that if my child fails to check his/her phone in possession of one during the school day (including lunch/recess perioderty (other than the office) he/she will lose his/her privilege for the entities. | s<br>ne/<br>d) |
| Parent Signature:   | Date:  | -              |
| Child's Name:   | Signature:   |                |
| Child's Namo  | Cignatura  |                |