Mobile phone and other portable devices agreement

I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued: iPad number: Signature I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued: iPad number: Signature I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued: iPad number: Signature I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued: iPad number: Signature I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued: iPad number: Signature I have read, understand and agree to adhere to the Loughborough Campus Nursery 'Mobile phone and other portable devices' policies. Practitioner's name: Date issued:

Signature

iPad number: