

MOBILE COMPUTING DEVICE AGREEMENT

This Agreement is valid for the _____ school year only.

Every student, regardless of age, must read and sign below:

I have read, understand, and agree to abide by the terms of the Wallace School District’s policies regarding District-provided mobile computing devices (Policy 3275). Should any violation or misuse of the device occur while it is in my custody, I understand and agree that I may lose access to the device or may lose the privilege of taking it home regardless of whether the misuse was committed by me or another person.

I accept full responsibility for the safe and secure handling of the device for this school year. I accept full responsibility for the proper use and safeguarding of the device. I understand that it is my responsibility to immediately report any damage, theft, or problems with the device to a teacher or administrator.

User’s Name (Print): _____ Home Phone: _____

User’s Signature: _____ Date: _____

Address: _____

Status: I am 18 or older I am under 18

If signing this policy when under 18, I understand that when I turn 18, this policy will continue to be in full force and effect and agree to abide by this policy.

Parent or Legal Guardian: If the applicant is under 18 years of age, a parent/legal guardian must also read and sign this agreement.

As the parent/guardian of the above student, I understand my child’s responsibility in the use and care of the device and my financial responsibility in the event my student loses the device or is found to be the cause of deliberate or negligent damage to it. I understand that if he or she is found to be responsible for deliberate or negligent damage or for the loss of the device, I will be financially responsible for reasonable repair/replacement cost.

Examples of Deliberate/Negligent Damage: Keys removed from the keyboard, broken or cracked screen due to dropping or blunt force, defacement or permanent damage to the outer cover.

Current Replacement Cost: \$245

I have read Policy 3275 and explained it to my child. I understand that if any violation or misuse of the device occurs while it is in my child’s custody, his or her access privileges to the internet or use of a mobile computing device can be suspended or terminated, and that he or she may face other disciplinary measures, regardless of whether the misuse was committed by him or by another person.

I also understand that I will be responsible for monitoring my student’s use of the device outside of the school setting.

Opt Out: I do not wish my son/daughter to take the device home at this time.

Parent/Legal Guardian (Print): _____ Home Phone: _____

Signature: _____ Date: _____

Address: _____

*** District Use Only ***

TECH INT:

CHECK-OUT DATE: _____ Device: _____ ID #: _____ School: _____

Device: Charger: Case/Cover: Other: _____ Condition (Circle): New Used

CHECK-IN DATE: _____

	RTN	Condition	Notes	Cost
	Y / N / NA	E / G / F / P / D		
Device:				
Charger:				
Case/Cover:				
Other:				

CODES: (E) Excellent (G) Good (F) Fair (P) Poor (D) Damaged

Total Cost: