

Student Equipment Agreement Form – Stay at School Devices

PLEASE PRINT

Student ID: _____ School Year: 2016-2017 School: _____

Last Name: _____ First Name: _____

Computer CS Bar Code _____ Serial #: _____

iPad CS Bar Code _____ Serial #: _____

BORROWER'S AGREEMENT: The borrower (student/parent named below) agrees to assume full responsibility for the safety, care, and maintenance of the device. While the device is in the borrower's possession, the borrower agrees to abide by all CS Policies.

The device is the property of the school district, and as such, is subject to monitoring and search of contents at any time. Please note that the device may be equipped with location tracking. There is **NO** expectation of privacy in location, use, or data stored on the device. The device must be returned to the district immediately upon request, at the end of the year, or upon departure or termination from the District.

While the equipment is assigned to me, I agree to the following:

1. I have read and understand the *Collierville Schools Resource Guide* and have discussed the material with my child. An online copy of this guide can be found at: <http://bit.ly/2gGuYNU>
2. I will take care of my device as outlined in the Collierville Schools Resource Guide.
3. If my device is damaged, lost, or stolen I will report it to the school immediately.
4. I understand the device is my responsibility and I will not loan it to other individuals.
5. I will know where the device is at all times.
6. I agree that if the device is damaged while in my care, I will pay for the cost of device repair.
7. I will keep food and beverages away from my device since they may cause damage to the device.
8. I will not disassemble any part of my device or attempt any repairs.
9. I will use my device in ways that are responsible, appropriate, meet CS expectations and are educational.
10. I will **NOT** place decorations (such as labels, stickers, markers, etc.) on the device. I will not deface the CS device identifiers on my device.
11. I understand that my device is subject to inspection at any time, without notice and remains the property of the CS District. I will provide the device passcode and any passwords to staff, immediately upon request.
12. I will follow the policies outlined in the device Procedures and **Use of the Internet Policy #4 .406** while at school, as well as outside the school day.
13. I understand that I am subject to disciplinary action if inappropriate content is found on the device.
14. I will file a police report in the event of theft or vandalism.
15. I agree to return the District device, case, power cords, and any other accessories in good working condition.

To Be Completed by STUDENT:

First & Last Name (print): _____ Email Address: _____

Teacher: _____ Grade: _____

Student Signature: _____ Date: _____

To Be Completed by PARENT/GUARDIAN:

First & Last Name (print): _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Email Address: _____

(Home Phone): _____ (Cell): _____ (Work): _____

Parent Signature: _____ Date: _____

Check Out Signatures:

Student _____ (Date) Administrator/Designee _____ (Date)

Check In Signatures: (Relieves student/parent of obligations listed above.)

Student _____ (Date) Administrator/Designee _____ (Date)

The original COLOR COPY form should be submitted to the Technology Department. A copy of the completed form should be kept on file at the school for the current scholastic year and a copy given to the student.