

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 Coeur d'Alene School District's policies and procedures regarding District-provided mobile computing devices (Policy No. 3275 and 3275P). 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 and will forfeit any fees paid for use of the device, 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 under all applicable policies. 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 I am signing this policy when I am 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. If a District device is lost, damaged or stolen while under the control of my child, we are expected to file a claim under our insurance coverage if applicable and reimburse the District for the full cost of the loss or the amount covered by the insurance carrier.

I have read the District Policy No. 3275 and 3275P and explained them 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, that he or she will forfeit any fees paid for use of the device, and that he or she may face other disciplinary measures, regardless of whether the misuse was committed by him or her or by another person.

Parent/Legal Guardian (Print): _____

Signature: _____

Home Phone: _____

Address: _____

Date: _____