

## **Plentywood Schools School/Home Device Use Agreement**

- I will take care of my iPad/Chromebook.
- I will never leave my iPad/Chromebook unattended.
- I will never loan out my iPad/Chromebook to other individuals.
- I will know where my iPad/Chromebook is at all times.
- I will charge my iPad/Chromebook battery daily.
- I will keep food and beverages away from my iPad/Chromebook since they may cause damage to the device. This includes taking the iPad/Chromebook to the lunchroom during breakfast and/or lunch.
- I will not disable any part of my iPad/Chromebook or attempt any repairs.
- I will protect my iPad/Chromebook by only carrying it while in the case provided.
- I will use my iPad/Chromebook in ways that are educational, appropriate, and meet Plentywood Schools' expectations.
- I will not place decorations (such as stickers, markers, etc.) on my iPad/Chromebook or provided case.
- I will not deface the serial number iPad/Chromebook sticker on any iPad/Chromebook.
- I will not download unauthorized content such as games, browsers, etc. to my iPad/Chromebook.
- I understand that my iPad/Chromebook is subject to inspection at any time without notice and remains the property of Plentywood Schools.
- I agree to provide username, password, passcode and other security information upon request of Plentywood Schools.
- I will not change username, password, or passcode without administrative approval.
- I will follow the policies outlined in the Student Handbook and the Technology Acceptable Use Agreement when at school, as well as outside the school day.
- I will notify Plentywood Schools in the event of theft, vandalism, and other acts covered by insurance.
- I will be responsible for all damage or loss caused by neglect or abuse.
- I agreed to return the iPad/Chromebook, case, and charging cords in good working condition.

School District Damage/Lost Device Fees: (all listed items will be purchased through the school, not a retailer)

- Charging Cord - \$20
- Case - \$15
- Damaged Device – Full Replacement Cost
- Lost Device – Full Replacement Cost

**I agree to the School/Home Device Use Agreement and will follow the stipulations set forth.**

Student Name (Please Print): \_\_\_\_\_ Grade: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_