



Personalization of Learning through Technology (PLT)

South Washington County Schools

Student and Parent iPad Loan Agreement / 2017-2018

All electronic technologies must be used in accordance with the educational program and mission of the District. Access to district technologies is a privilege and may be revoked at any time for inappropriate behavior or conduct not in accordance with the District Technology Acceptable Use and Safety Policy.

Proper iPad use, safety, and helpful guidelines are available at your school or on the PLT website located at:

<http://www.sowashco.org/academics/teaching-and-learning-services/personalization-learning-through-technology-PLT>.

Please know that by signing this agreement you are agreeing to adhere to our District Technology Acceptable Use and Safety Policy (#524).

Although issued to the student, the iPad is and remains the property of South Washington County Schools. It may be reviewed and revoked at any time. The student should have NO expectation of privacy regarding content on the iPad. District iPads can only be activated with a valid District 833 username and password.

If a student fails to return the iPad and accessories (*iPad case, Apple cord, Apple charging brick*) at the end of the school year or upon termination of enrollment from the issuing school, that student or his/her parent/guardian will be billed for the cost to replace the items not returned. Failure to comply with this requirement will result in a theft report being filed with the Police Department.



STUDENT:

I/We understand my/our responsibilities as a student regarding the assigned iPad and have read the conditions of the iPad Protection Plan (information at your school or on the District PLT website):

Student Name (PRINTED)	Student Signature	School	Date	Entire Year	Tri 2 & 3	Tri 3
				\$35	\$25	\$15
				\$35	\$25	\$15
				\$15	\$10	\$5
				\$15	\$10	\$5
				\$0	\$0	\$0

PARENT:

I/we understand my/our responsibilities as a parent/guardian regarding the assigned iPad and have read the conditions of the iPad Protection Plan (information at your school or on the District PLT website):

Parent/Guardian signature: _____ Date: _____

Parent/Guardian signature: _____

Please **indicate** below whether or not you wish to enroll in the optional iPad protection plan for the annual amount referenced above, which covers accidental damage to the device; fire, flood, natural disasters, power surge, and theft (with filed police report).

_____ **Yes**, we have read, understand and agree to the conditions of the optional iPad protection plan and will pay the amount referenced above for the accidental damage protection; *iPad accessories (cable/brick/case) are not covered under the protection plan. Please pay via: FeePay <https://sowashco.feepay.com/>, check or cash.*

_____ **No**, we have read, understand and have chosen to waive participating in the optional iPad protection plan that covers accidental damage of the student issued iPad. I/We understand that we are responsible for any needed repairs up to a full replacement cost of \$499 for the device and separate fees for the accessories (*cable/brick/case*).

FOR OFFICE USE ONLY	Check #	Cash	Fee Pay	Total \$ Amount	Comments