Poulakidas ES Device Liability and Responsibility Checkout Form

Student Name (please print):	
Grade:Student ID:	
This computer agreement is to signify that the above-named student and parent/guardian are fully responsible for maintaining this device. Prior to device checkout, this form must be signed and initialed by both the student and the student's parent or guardian and returned to the school. It is agreed that the Washoe County School District is not responsible for any loss or damage done to the device while in possession of the student. If loss or damage occurs, the student and parent or guardian are responsible for the repair or replacement of the device.	
Technology Cost:Technology fee, Non-Refundable (repair keyboard keys)	\$10.00
Laptop Computer Insurance—Securranty MANDATORY	
	,
Repair Costs: Repair fee (per repair + parts) Lost/broken AC adapter/charger Lost or broken case	\$84.00
 Identification sticker/label replacement	
I understand that my child will be receiving a device for academic (use both at school and at home.
I have read and agree with the WCSD Parent-Student Device Han	dbook. (/)
3. I have viewed the Poulakidas ES Family Orientation videos and un	derstand and agree to abide by the
conditions set forth within the guidelines in the videos. (
4. It is understood that unpaid fines for computer loss may result in student records. Continued misuse of the device may result in a lod discipline according to the guidelines in the Student Handbook an Handbook. (oss of this privilege and potential
5. Failure to return the device upon request or termination of enroll being filed for stolen property belonging to the Washoe County Sc (/) By signing below, I acknowledge that I have read and agree with the Handbook, have viewed the Poulakidas Family Orientation videos abide by the conditions set forth within the guidelines stated abort	chool District. he WCSD Parent/Student Device , and understand and agree to
•	Date
	Date
(OFFICE USE ONLY) Asset Number Model Ser	ial Numher