

Madison County Public Schools Student Mobile Device Agreement Form

Madison County Public Schools is excited to provide your child with a mobile device, and we believe it is an essential part of his or her education. This device provides your child access to a wide range of learning tools and systems that will support their access to the curriculum and provide them different options for sharing their learning. Before your student can bring home a school-assigned device, we need you to read, sign and return this Mobile Device Agreement Form.

STUDENT ASSIGNED LAPTOPS BY MADISON COUNTY PUBLIC SCHOOLS AGREE TO:

1. Abide by the requirements of the Acceptable/Responsible Use Policy (GAB/IIBEA and GAB-R/IIBEA-R).
2. Accept financial responsibility and possible disciplinary action for losing, destroying, or otherwise failing to return the mobile device at the time and location designated by the school administration and all accessories in its original condition at the end of the mobile device assignment. Any mobile device not returned using procedures designated by the school administration will be considered lost or stolen and will be processed as such. All repairs and parts replacements, including device charger, must be made through Madison County Public Schools.
3. This mobile device agreement ends on the last day of the current school year or the last day that the student is enrolled in Madison County Public Schools, whichever comes sooner. Failure to return device by this designated date will result in a full cost of replacement charge to the parent/legal guardian responsible for this agreement.

INTENTIONAL OR NEGLIGENT DAMAGE OR LOSS

The full cost of replacement will be applied for intentional damage that cannot be repaired, and for lost or stolen computers. The parent/legal guardian will be held responsible for paying the full replacement cost of replacement device.

STUDENT AND PARENT/LEGAL GUARDIAN SIGNATURES

I. TO BE COMPLETED BY THE STUDENT:

I have read the Madison County Public Schools Student Mobile Device Agreement Form, and understand and agree to abide by its requirements in all respects. I have read the Acceptable/Responsible Use Policy, and understand and agree to abide by its requirements in all respects. Should I violate any aspect of either agreement, I shall accept and be subject to all ramifications, including but not limited to access and other privileges and other disciplinary actions.

Student Name

Student Signature

Date

II. TO BE COMPLETED BY PARENT/LEGAL GUARDIAN

I request that my child be issued the equipment described below for use outside of the classroom and school. I understand and agree that if the device is lost, stolen, confiscated by law enforcement, or damaged beyond repair intentionally or due to negligence, I will be held responsible for paying the full replacement cost.

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NOTE: Your signature on this acknowledgment is binding and establishes that you understand the terms and conditions of this agreement and the Acceptable/Responsible use Policy and their significance. Madison County Public School Board Policies GAB/IIBEA and GAB-R/IIBEA-R may be obtained at www2.madisonschools.k12.va.us.

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

III. TO BE COMPLETED BY MCPS STAFF

Device Serial Number: _____