

NAPOLEON COMMUNITY SCHOOLS

ChromeBook Insurance Form

I WILL participate in the Napoleon Community Schools District's Electronic Device Accident Protection Plan. I agree to the provisions outlined in the policy terms and understand that:

- ★ Enrollment in this program is required.
- ★ The policy only covers the school issued electronic device and does not cover the charger, case or stickers.
- ★ This policy does not cover cosmetic damage that does not impair the use of the electronic device including, but is not limited to: dishonest, fraudulent, intentional, negligent, or criminal act.
- ★ Damage to the device is still the responsibility of the individual employee or student.
- ★ Liability is limited to the replacement/repair of the device; no additional liability is implied or assumed.
- ★ Opening the casing of the device to expose its internal components or hacking the operating system voids warranties and is not covered by this policy. Physically tampering with or hacking the operating system in an attempt to modify a device removes manufacturer protections.
- ★ Devices covered by this protection plan must be in an approved case. Damage that occurs in transit to and from the school site or school activities when the device is not housed in an approved case is not covered under this policy.
- ★ Enrollment in this program does not cover: dishonest, fraudulent, intentional, negligent/criminal acts.
- ★ The enrollment cost is non-refundable. If a student leaves the district before January 15, this amount will be prorated.
- ★ **A \$5.00 copay will be collected for second and third claims for device repairs; subsequent repair costs will be the responsibility of the individual in full, limited to parts and not including labor.**

By completing this form, the student and parent acknowledge that they have read this agreement and agree to them terms.

Student Name: _____ Grade: _____

Parent/Guardian Signature: _____

Date: _____

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Parent/Student Responsibility Use Agreement **ChromeBook Acknowledgement**

As the Parent/Guardian of _____, I have read, understand, and agree with the stipulations outlined in the Napoleon Community Schools Responsible Use Agreement and the Napoleon Community Schools Electronic Device Insurance Protection Plan found in the Student Technology Handbook.

I understand that such conditions include:

- ★ Filters will be installed on district provided electronic devices and on the district networks. Filters will also be installed whenever logging into the district network.
- ★ Internet usage will be monitored for all electronic devices logged onto the network while on the school premises. Supervising electronic device use away from school, including filtering, is my responsibility as the parent/guardian.
- ★ As part of instructional practice, a district-provided electronic device will be issued to my student for use at school, even if I choose not to have the device come home. If I choose to not have the device come home, my student is still responsible for completing any online work not completed during school hours. Participation in the Electronic Device Accident Protection Plan or equivalent is required.

By completing this form, the student and parent acknowledge that they have read this agreement and agree to its terms.

Parent/Guardian Signature

Date