



Cornwall-Lebanon School District Student Device Insurance

2026–2027 School Year

Cornwall-Lebanon School District lends a device to each student to support learning. We ask students to follow the usage guidelines and handle their device with care, and we work to make devices last by repairing and restoring them whenever possible.

Families are not responsible for normal wear and tear. But accidents like drops and spills do happen. To help with repair costs when they do, the District offers optional device insurance. Insurance is strongly recommended but is not required. The insurance fee is paid once a year and is non-refundable.

Important: If a family chooses not to purchase insurance and the device is damaged, the family is responsible for the full cost of repair or replacement.

The Insurance Fee

Make checks payable to Cornwall-Lebanon School District. Cash is also accepted.

Individual Plan (per student, per year)
\$25

What Insurance Covers

Insurance covers **accidental damage**, such as a cracked screen. With insurance, the family pays a deductible of just **10% of the cost of the parts**. The District does not charge for labor.

For example: if a screen repair costs \$50 in parts, a student with insurance pays only \$5.

What Insurance Does Not Cover

Insurance does not cover the following. For these, the family is responsible for the full cost of repair or replacement:

- **Intentional or deliberate damage.** This is treated as vandalism. The student is billed the full repair cost and may face additional disciplinary action.
- Loss or theft of the device.
- Lost chargers or accessories.

When Something Happens

If your device is damaged, bring it to the Technology Services Center as soon as possible. You will receive a loaner device to use while yours is repaired. After the repair, the family is responsible for any fees for the incident. Incidents may be subject to an administrative review.

If a device is lost or stolen, notify the school immediately and file a police report. Until an administrative review is held, the student may not take a replacement device home. Insurance does not cover loss or theft.

If this form is not returned, the District will treat it as choosing not to purchase insurance, and the family will be responsible for the full cost of repair or replacement.

Select Your Option

Please complete one form per student and check one box below.

☐ **I DO want to purchase insurance.** I have read and understand this form and agree to the conditions for student use of District devices.

☐ **I DO NOT want to purchase insurance at this time.** I understand that I am financially responsible for all repair or replacement costs if the device is damaged. I have read and understand this form and agree to the conditions for student use of District devices.

Student and Family Information

Student Printed Name: _____ **Student ID:** _____

Student Signature: _____

Parent/Guardian Signature: _____ **Date:** _____

School Attended (circle one): CW EB SL UC MS HS

For Office Use Only

Payment Amount: _____ **Check Number:** _____ **Cash Receipt #:** _____

Notes: _____