

# **Watauga County Schools One-to-One Mobile Computing Device Initiative**

## **Student Mobile Computing Device Agreement**

THIS FORM IS TO BE COMPLETED BY THE **PARENT AND STUDENT**. PLEASE PRINT ALL INFORMATION.

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|-------------------|--------------------|---------------------|---------------|
| Student Last Name | Student First Name | Student Middle Name | Student Grade |
|-------------------|--------------------|---------------------|---------------|

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|---------------------------|----------------------------|--------------|
| Parent/Guardian Last Name | Parent/Guardian First Name | Student ID # |
|---------------------------|----------------------------|--------------|

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|            |            |            |             |
|------------|------------|------------|-------------|
| Home Phone | Work Phone | Cell Phone | Other Phone |
|------------|------------|------------|-------------|

I, the Watauga County Schools (WCS) student named above, have read (or have had read to me) WCS Technology Responsible Use policy (#3225/4312/7320). My signature below indicates I understand and will abide by this policy and the procedures and guidelines in the WCS Student/Parent Mobile Computing Device Handbook at all times. I understand that should I commit any violation, my access privileges may be revoked, and school disciplinary action and/or appropriate legal action may be taken.

- ✓ I understand the Mobile Computing Device ("Device") is property of Watauga County Schools and is assigned to me.
- ✓ I will use my assigned Device appropriately for school purposes.
- ✓ I will care for my assigned Device and not leave it unsupervised in unsecured locations.
- ✓ I will be responsible for all damage or loss to my assigned Device caused by neglect or abuse.
- ✓ I will report the loss or theft of my assigned Device as outlined in the Student/Parent Mobile Computing Device Handbook.
- ✓ I will not loan my assigned Device to another individual.
- ✓ I will charge my assigned Device before each school day.
- ✓ I will not disassemble or attempt any repairs on my assigned Device.
- ✓ I will carry my assigned Device in its school-issued protective sleeve/case.
- ✓ I will not place stickers, drawings, markers, etc. on my assigned Device.
- ✓ I will not deface the serial number/asset number stickers on my assigned Device.
- ✓ I agree to return my assigned Device, power cord, and other accessories in working condition.
- ✓ I understand I may be criminally charged if my assigned Device is not returned at the designated time.

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Student Signature

Date

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Parent Signature

Date

