

Jackson-Madison County Schools Student Portable Device Agreement

PLEASE PRINT

Date: _____ Location: (Base School) _____

Last Name: _____ First Name: _____

JMCSS Asset Tag #: _____ Serial #: _____

Accessories: _____

While the device is in your possession, you agree to the following:

1. Legal title to the property belongs to Jackson-Madison County Schools. Your right of possession and use is limited to and conditioned upon your full and complete compliance with this agreement and Jackson-Madison County Schools Student Acceptable Use Policy 4.406. (A signed Student AUP must be on file before device is released.)
2. You are responsible for the proper use and operation of this device. You must comply with all of the Jackson-Madison County Schools Board Policy, which includes Care of School Property Policy 6.311.
3. Any software and applications that you install will be for JMCSS purposes and within copyright guidelines.
4. You will not delete or remove software that is already installed.
5. You will not copy software from this device to another device that is not school property.
6. You will not change any of the original settings on this device (excluding settings needed for data connection).
7. If loss or property damage occurs to this device while in your custody or due to misuse, you agree to take care of the financial obligation related to this event. Loss or theft of the property must be reported to the District by the next school day after the occurrence. A police report must also be filed and a copy submitted to the base school office.
8. You will present this device with its bag, cords, and cables for check-in at the end of the school year at your base school.
9. Home use is limited to the JMCSS Student listed on this form.
10. Device is provided for educational purposes. The parent/guardian will accept full responsibility for the actions of the student using this device.
11. Device is JMCSS property and is subject to inspection at any time; thus, you should not have an expectation of privacy related to any data or documents stored on this device.

Note: If the cost of repair or replacement for the above item is determined to be my responsibility, Jackson-Madison County School System will be reimbursed within thirty (30) days of the reported loss. If not reimbursed, within 30 days, payment details will be arranged with the Accounting Department.

Check-Out Signatures: (Please Sign, DO NOT PRINT) Signature indicates that you agree to all the device guidelines contained within this document and the current Student Acceptable Use Policy.

Student (Date) Parent/Guardian (Date)

Check-In Signatures: (Relieves Student and Parent/Guardian of obligations listed above.)

Student (Date) Parent/Guardian (Date)

Original Form: Technology Department CC: Base School Librarian
Parent

**Note: If device issued as part of student's IEP, JMCSS SPED Department must receive a copy of the Student Portable Device Agreement.*