*Only complete circled items *

Jackson-Madison County Schools Student Portable Device Agreement

PLEASE PRINT		
Date: 8/3/33 Last Name:	Location: (Base School) First Name:	WBM5
JMCSS Asset Tag #:	Serial #:	
Accessories: Character		
 While the device is in your possession, you agree to the follow Legal title to the property belongs to Jackson-Madis conditioned upon your full and complete compliant Acceptable Use Policy 4.406. (A signed Student AUF You are responsible for the proper use and operation Schools Board Policy, which includes Care of School Any software and applications that you install will be found to you will not delete or remove software that is already You will not copy software from this device to another You will not change any of the original settings on this If loss or property damage occurs to this device while obligation related to this event. Loss or theft of the poccurrence. A police report must also be filed and a construction of the series of the poccurrence. A police report must also be filed and a construction of the poccurrence is limited to the JMCSS Student listed on the policy of the policy	son County Schools. Your right ce with this agreement and JP must be on file before device of this device. You must come property Policy 6.311. For JMCSS purposes and within installed. In device that is not school property device (excluding settings need in your custody or due to mist property must be reported to the copy submitted to the base schables for check-in at the end of his form. In at any time; thus, you should the same that the	ackson-Madison County Schools Student is released.) ply with all of the Jackson-Madison County a copyright guidelines. erty. eded for data connection). use, you agree to take care of the financial ne District by the next school day after the ool office. the school year at your base school. responsibility for the actions of the student not have an expectation of privacy related
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 NO the device guidelines contained within this 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 Departmen	nt CC: Base So Parent	chool Librarian

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