



Student Loaner Device Authorization

Grades 9 – 12

Student Name _____ Homeroom _____

Loaning Guidelines

This authorization allows a student in grades 9-12 to check out a Student Loaner Device from the Library as a temporary replacement while their personal device is being repaired.

In consideration for the opportunity to use this device, my student will:

- Return the device by the required check in date provided by the library at the time of checkout. I understand that failure to return the device by the check in date provided will result in a charge of \$5 per day that the device is late.
- Return the device in the same condition as it was in when issued. If there is a problem with the device, my student will bring it to the attention of library/media center personnel right away.
- Not lend the device to anyone else. Only my student will be using it during the time he checks it out.
- Follow all school policies as outlined in the school handbook, the technology acceptable use policy and the WiFi agreement.

I understand:

- The student loaner device is provided to my student solely as a temporary replacement while his personal device is being repaired. It is my responsibility to complete the repair of my student's personal device as promptly as possible and return the student loaner device to the library once the repair of my student's personal device is complete.

continued

- If the device that my student has checked out is lost, damaged, stolen, or missing, and such circumstances were preventable, it is my responsibility, and I will be responsible for the cost of its repair or replacement.
- The replacement costs are as follows -
 - The device will be up to \$325
 - The adapter is \$15
 - The protective case is \$25
- This authorization will remain in force until such a time as I notify the school in writing that I no longer want a student loaner device checked out to my student. Written notification revoking student loaner privilege should be delivered to the Student Affairs Office.

I give my permission for my student to participate, when needed, in the Device Loaner Program

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Return this form to the Student Affairs Office