

Wausau School District iPad Use Agreement

The following information must be filled out completely prior to obtaining your iPad. Failure to complete the following information may delay your iPad being issued. One form per student must be filled out. The iPad Handbook and Responsible Use of the Internet documents can be found on the District Webpage or paper copies can be requested from your school office.

Parents/Guardians:

- ___ I have read and discussed the iPad Policy Handbook and the Responsible Use of the Internet document with my child. I understand that my child's failure to follow the information and expectations outlined in these documents may result in disciplinary action and/or loss of use privileges.
- ___ I have read and understand the COPPA information (pgs 10-11 of handbook) and permit the Wausau School District to provide personal information for my child consisting of first name, last name, school email address and username.
- ___ iPad Insurance:
 - o ___ **Accept** the insurance opportunity and pay the waiver fee (\$10.00 per year). The first repair due to accidental damage will be fully covered. The second repair due to accidental damage will be fully covered. All remaining repairs will be billed to the family at 50% of actual cost. Fully replaced iPads will be billed at 50% of actual replacement cost. (District retains the replaced device.)

or

 - o ___ **Decline** the insurance opportunity and take full financial responsibility for any loss or damage to the device issued to my child.

Parent
Signature _____ Date _____

Student:

- ___ I have read and understand the iPad Policy Handbook and the Responsible Use of the Internet document. I understand that my failure to follow the information and expectations outlined in these documents may result in disciplinary action and/or loss of use privileges.

Student Name (print) _____

Student
Signature _____ Date _____