



Device Type: Chromebook or iPad

Serial #: \_\_\_\_\_

iPad SN: Settings>Serial Number Chromebook SN: Bottom of Chromebook "SN:"

Asset Tag # (Chromebook Only) \_\_\_\_\_

2023 - 2024 School Year

Please complete, print, and return one form per child.

### Student Computer Use Acknowledgment Form



Acceptable Use Agreement:

<https://www.novi.k12.mi.us/departments/technology-information/acceptable-use-agreement> or <https://tinyurl.com/2d66m7wp> or

No student shall be allowed to use a school-issued mobile computing device until the parent/guardian has signed and returned this acknowledgment to the school.

**\*Students are not to switch or swap NCSD devices with another student\***

#### Parent/Guardian:

I have read the Acceptable Use of Technology Agreement. I understand that my child's use of the school-issued computer/iPad is subject to compliance with these rules. I further understand that violation of the policy and/or rules may result in the revocation of computer privileges and may also be subject to further disciplinary and/or legal action.

By signing this form, I agree to the following: 1. I am responsible for the equipment or property issued to my child, who will use it in the manner intended. 2. I will be responsible for any damage done (excluding normal wear and tear). 3. Whenever requested by the school administration, I will return the item(s) issued to me in proper working order (excluding normal wear and tear). I will reimburse the district for damage or loss of any item(s) issued to my son/daughter that is damaged or lost, at my expense. If I do not pay any fees or return the device, I understand that my son/daughter may be excluded from graduation activities and I may face legal action or outstanding debts may be turned over to a collection agency.

Any suspicion of theft and/or intentional damage to the item(s) will be reported to the appropriate law enforcement agencies.

**I received the above-described equipment. The equipment is in good condition and in operating order. I understand and agree to the terms and conditions of this agreement.**

Today's Date: \_\_\_\_\_

**By checking out an NCSD device, the parent/guardian is acknowledging their child needs a device to support learning at home and in the Novi Community School District.**

Signature of Parent/Guardian: \_\_\_\_\_

Legibly Printed Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian phone number: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Id Number: \_\_\_\_\_

Grade: \_\_\_\_\_

School/Building \_\_\_\_\_

Revised: 7/17/2023