

Damage Claim Form

Date				
Student info	ormation			
Name				
Grade	Teacher	Bı	uilding	
iPad inform	ation			
Asset Tag # _				
Passcode to (unlock unit			
Apple ID (em	ail address)			
Apple ID Pass	sword			
•	ad Has Been Deactiva		Find My iPad → Slide Button to Off)
Description	of Damage			
Bro	ken Screen	Damaged Case	Liquid Damage	
Inop	perative buttons, port	s, etc. (Indicate)		
Oth	er (Please Specify)			
Student Signa	ature			
Parent Signat	ture		Phone #	
Principal Sign	nature		Date	
Office use ON	NLY:			
	ed in District Office		Date Received from Repair	