

SCHOOL YEAR: 25-26

GRADE \_\_\_\_\_

HOME ROOM TEACHER \_\_\_\_\_



# Constantine Public School District

## Electronic Device Insurance Protection Plan

Constantine Public School District is providing and administering accident protection as part of our current digital learning initiative. Enrollment in this plan is required for anyone planning to take a school district electronic device home who has not otherwise provided evidence of coverage that is acceptable to the district and equal to or greater than what is indicated in this agreement. This plan covers “accidental damage” to the electronic device and is designed to limit individual financial responsibility for any damage as described in the coverage section below. Each school year the annual premium begins coverage for all electronic devices provided by the school district for use by individual staff members or students. In addition, each electronic device is covered under a manufacturer's warranty that covers the normal operation of the electronic device to ensure that it is functioning properly. ***Constantine Public Schools expects Chromebooks to remain in the provided protective case supplied with each device. Failure to do so may result in charges for any repairs the case would have prevented.***

<p style="text-align: center;"><b>Program Rate / Coverage</b></p> <ul style="list-style-type: none"> <li>● \$25 annual premium per student</li> <li>● \$80 maximum per family</li> <li>● \$25 per EMC student</li> <li>● Limit of Liability: Maximum of \$300 annually for each separate electronic device.</li> </ul>	<p style="text-align: center;"><b>Effective Coverage / Expiration Date</b></p> <ul style="list-style-type: none"> <li>● <u>Effective Date</u>: Based on the receipt of signed agreement</li> <li>● <u>Expiration Date</u>: Last day of employment/ enrollment for the current school year or one year from the date of the last signed agreement with CPS.</li> </ul>
<p style="text-align: center;"><b>Coverage</b></p> <ul style="list-style-type: none"> <li>● <u>Accidental Damage</u>: Pays for accidental damage caused by liquid spills, drops, or any other unintentional event.</li> <li>● <u>Theft</u>: Pays for loss or damage of the electronic device due to theft. The claim requires a police report to be filed.</li> <li>● <u>Fire</u>: Pays for loss or damage of the electronic device due to fire. The claim must be accompanied by an official fire report from the investigating authority.</li> <li>● <u>Electrical Surge</u>: Pays for damage to the electronic device due to an electrical surge. Must be investigated by the Tech Director to confirm.</li> <li>● <u>Natural Disasters</u>: Pays for the loss or damage of the electronic device caused by natural disasters.</li> </ul>	<p style="text-align: center;"><b>Exclusions</b></p> <ul style="list-style-type: none"> <li>● <u>Dishonest, Fraudulent, Intentional, Negligent or Criminal Acts</u>: Will not pay if damage or loss occurs in conjunction with dishonest fraudulent, intentional, negligent or criminal act. Individuals will be responsible for the full amount of the repair/replacement.</li> <li>● <u>Consumables</u>: Including but not limited to the case (\$60,)</li> <li>● <u>The charger (\$30), and software</u>. Cosmetic Damage that does not affect the functionality of the device. This includes but is not limited to scratches, dents, and broken plastic ports/parts or port covers. Students are responsible to pay this replacement fee when a charger is lost.</li> <li>● <u>Voiding the manufacturer’s warranty by tampering with the device or system software</u>.</li> <li>● <u>CPS is not liable for any loss, damage (including incidental, consequential, or punitive damages) for expenses caused directly or indirectly by the equipment</u>.</li> </ul>

PLEASE COMPLETE THE INFORMATION ON THE NEXT PAGE AND  
TURN IN THAT **FORM AND PAYMENT** TO YOUR SCHOOL OFFICE.

## Constantine Public School District

### Electronic Device Insurance Protection Plan

Child's Name	GRADE:
Parent/Guardian Name	
Mailing Address	
City, State, Zip	
Home Phone:	Cell Phone:

*I give permission for my child to receive virtual instruction as needed.*

*(Parent signature)* \_\_\_\_\_

**I WILL participate** in the Constantine Public School District's Electronic Device Accident Protection Plan. I agree to the provisions outlined in the policy terms and understand that:

- Enrollment in this program is required to take school district electronic devices off school premises.
- The policy only covers the school issued electronic device and does not cover the charger or case.
- This policy does not cover cosmetic damage that does not impair the use of the electronic device; including, but not limited to: scratches, dents, and broken plastic parts or connection ports.
- Damage as a result of a violation of the Electronic Device User Agreement is not covered; including, but is not limited to: dishonest, fraudulent, intentional, negligent, or criminal acts.
- Damage to the device is still the responsibility of the individual employee or student.
- Liability is limited to the replacement/repair of the device; no additional liability is implied or assumed.
- Opening the casing of the device to expose its internal components or hacking the operating system voids warranties and is not covered by this policy. Physically tampering with or hacking the operating system in an attempt to modify a device removes manufacturer protections.
- Devices covered by this protection plan must be in an approved case. Damage that occurs in transit to or from the school site or school activities when the device is not housed in an approved case is not covered under this policy.
- Enrollment in this program does not cover: Dishonest, Fraudulent, Intentional, Negligent/Criminal Acts.
- The enrollment cost is non-refundable. If a student leaves the district before January 15 this amount will be prorated.

Employee/Student Name: _____	_____	_____
Printed	Signature	Date
Parent or Guardian Name: _____	_____	_____
(For students only) Printed	Signature	Date

**Office Use Only: Payment Information:**

- \$\_\_\_\_\_ Payment Amt. Enclosed.
- FORM OF PAYMENT: (*circle*) Cash Check #\_\_\_\_\_
- Please note, checks will need to be cleared before the device can be issued.

**NOTES:**

## Parent/Guardian Chromebook & Internet Guide to Student Use

### Parent Letter of Understanding

Constantine Public Schools recognizes that with new technologies come new challenges to both teachers and parents. Below is a series of suggestions drawn from a wide variety of professional sources that may aid you, the parent, in effectively guiding your child's use of the Chromebook.

1. Go where your child goes online. Monitor the places that your child visits. Let your child know that you're there, and help teach her/him how to act as s/he works and socializes online.
2. Review your child's friends list. You may want to limit your child's online "friends" to people your child actually knows and is working with in real life.
3. Understand sites' privacy policies. Internet sites should spell out your rights to review and delete your child's information.
4. Report unwelcome or malicious online threats. Report in a timely fashion to the school any online interactions that can be considered threatening.
5. Help your child develop a routine. Many parents have found success by helping create a routine for their child's computer use. Define a routine as to how the Chromebook is cared for, recharged, and when and where its use is appropriate.
6. Take a look at the apps or programs. It is to the advantage of the students, parents/guardians, and school that the parents have a working understanding of the programs and student work found on the Chromebook.
7. Read and share with your child the CPS care and use policies. By reading and discussing the care and use policies, you can create a clear set of expectations and limitations for your child.
8. Please explain to your child that his/her Chromebook may be selected at random to provide their Chromebook for inspection.
9. When you have a question, concern or need, contacting your child's teacher as soon as you can is the best practice to prevent problems or delays with fixing your child's device.

*I have read the Letter of Understanding, and agree to contact my child's teacher as soon as possible when a question, concern or issue comes up, so that it can be dealt with as soon as possible.*

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Signature

# Constantine Public Schools

## Device User Agreement

**Purpose:** In order to support a more personalized approach to learning, Constantine Public Schools is providing devices to elementary, middle and high school students. Like a textbook, the device is a resource to support learning. Students with devices are required to follow the guidelines stated in the Code of Conduct.

### As a Student:

I will take good care of my school-issued device.

- Cords and cables must be inserted carefully into the device to prevent damage.
- Devices must never be left in an unlocked locker, unlocked car or any unsupervised area.
- Report any software/hardware issues to your teacher as soon as possible.
- Keep the device in a well-protected, temperature controlled environment when not in use.
- I will never loan out my school-issued device to other individuals.

### In addition, My child understands that:

1. To keep food and beverages away from the device since that may cause damage.
2. Not to disassemble, jailbreak or hack into any part of my or any school-issued device or attempt any repairs.
3. To protect my school-issued device by only carrying it in the case provided.
4. To use my school-issued device in ways that are appropriate and meet the school's expectations, whether at school, at home, or anywhere else.
5. That if a device is used in a way that is inappropriate, the student may be disciplined by the school.
6. The student will not place decorations (such as stickers, markers, etc.) on the school-issued device. They will not deface the serial number sticker on any school-issued device.
7. They understand that the school-issued device is subject to inspection at any time without notice and remains the property of the Constantine Public School District.
8. The student will not share their password(s) with anyone other than a teacher or adult from my school or the parent/guardian.
9. It is understood if my student damages or loses the device, is negligent to cause damage to the device, or if it is stolen, we may have to pay a fine.

**We understand that nothing we do with the device is private, and nothing we have on the device is private. We agree to the rules set forth herein.**

# Constantine Public Schools Device User Agreement

Student Name (Please Print): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**I have read and agreed to the Technology rules outlined in the document. I have also watched the mandatory parent informational video, or attended a mandatory parent informational meeting, and am fully satisfied that I understand the requirements for my student.**

Parent/Guardian Name (Please Print): \_\_\_\_\_

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

Date: \_\_\_\_\_