

Enrolled in Cooperative Fund:

Signature of District Employee:

## Bellevue Public Schools Technology Information, Permission and iPad Contract Form

CHILDREN			11/1
<ul> <li>□ I have been given a copy of and agree to the terms of the BPS iPad I</li> <li>□ I have been given a copy of and agree to the terms of the Internet/E</li> <li>□ I have been given a copy of the BPS Computer Damage/Loss Coope</li> <li>□ I have been given a copy of the BPS COPPA Compliance form and give information to operators of approved web-based educational programs</li> </ul>	Electronic Technology ( erative Fund Descriptic e consent for our school	Contract n of Terms to provide personal identifying	-
<ul><li>□ I agree to enter into the Bellevue Public Schools Cooperative Fund.</li><li>□ I decline to enter into the Bellevue Public Schools Cooperative Fun</li></ul>		n below and submit payment)	
Parent/Guardian Name (Print) Parent/Gu	ıardian Signature:		
Student Name:	Date:		
Computer Damage/Loss Cooperative F Please read the entirety of the following section to determine if this pr against damage and loss of the loaned technology equipment in your ca	rogram is needed for yo	of Terms ou and our student's protection	1
Coverage and Benefit This agreement covers the iPad loaned to the student against damage or value will be determined at the time of loss or damage. In the event of dathe amount of damage or loss to the iPad. You will be responsible for 30%	mage or loss, this agreen (up to \$95) of the amou	nent will pay 70% (up to \$222) o	f
The following claims are limited to ONE of each type per academic yea • iPad replacement due to loss, theft or excessive damage (\$95 for first • Replacement of damaged/cracked screen (\$45 for first claim; \$150 for	t claim; \$317 for subseq	uent claims)	
Claims	With Insurance	Without Insurance	
iPad Replacement (one claim covered by insurance per academic year)	\$95	\$317	
Cracked Screen (one claim covered by insurance per academic year)	\$45	\$150	
The following claims are NOT covered by this program:  • Loss/stolen/damaged charging block - \$20  • Loss/stolen/damaged charging cable - \$20  • Loss/stolen/damaged case - \$20	asset tag - \$10 plug broken off in head	dphone jack - \$30	
Effective and Expiration Dates This coverage is effective from the date this request form and payment as iPad is requested to be returned in good order to the school. In the even end of the cooperative agreement, premium costs will not be refunded.			
<ul> <li>Cost To Participate</li> <li>The cost is \$20 per school year. It is agreed and understood that:</li> <li>Participation is offered to all students.</li> <li>Participation is totally VOLUNTARY.</li> <li>A separate application will be needed for each student.</li> <li>A new application and fee must be completed and paid each school</li> </ul>	Paymen Signatu Date: _	d in Cooperative Fund: □ t method: □ Cash □ Check # re of Advisor:	
Cooperative Fund En	rollment		
Name of Student:		Student #:	-
Name of Parent/Guardian:			
I, (Parent/Guardian name)cooperative fund. I have read the iPad Loan Agreement Description of T			е
Parent/Guardian Signature:	Date:		
Receipt - cut off and give to pa	rent/guardian		]

☐ Check (\_\_\_\_\_ number)

Date: