

**WARREN-ALVARADO-OSLO SCHOOLS - DISTRICT ISSUED DEVICE  
STUDENT/PARENT PLEDGE**

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Parent: → I agree to monitor my student's internet usage outside of school.

Parent/Student:

1. I will not leave my school-issued device unattended.
2. I will not loan out the device or charger to other people.
3. I will know where the device and charger is at all times.
4. I will bring the device to school each day, fully charged.
5. I will keep food and beverages away from the device to prevent damaging it with spills.
6. I will not disassemble any part of the device or attempt any repairs.
7. I will carry the device in the protective case that is provided or my own case/backpack.
8. I will use the device appropriately meeting all of Warren-Alvarado-Oslo Schools expectations.
9. I will not deface or purposely damage the device in any way.
10. I understand that the device is subject to inspection at any time without notice and remains the property of Warren-Alvarado-Oslo Schools.
11. I will follow the policies in the District Technology Acceptable Use Policy.
12. I will report any damages, technical issues, or potential theft of the device to the school immediately.
13. I am aware that I am responsible for all damage or loss caused by neglect or abuse.
14. I agree to return the device, power cord, and case in good working condition to the school at the date expected at the end of the school year.

•Students who withdraw, transfer, are expelled, or terminate enrollment for any reason must return the device on the last day of their enrollment. There is no refund of the insurance fee.

I have read all the policies and guidelines in the WAO Schools District issued Device Student/Parent pledge. I understand our responsibilities and agree to all stipulations set forth in the District Technology Acceptable Use Policy, the district issued device insurance plan, and the student/parent pledge for device Use.

I understand that the district is to be held harmless for any activity conducted with the devices outside of school and it is my responsibility as a parent to monitor that activity.

I allow my child to participate in the WAO district issued device program.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Father/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
Mother/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



## WARREN-ALVARADO-OSLO SCHOOLS DISTRICT ISSUED DEVICE PROTECTION - INSURANCE PROGRAM DISTRICT ISSUED DEVICE INSURANCE PLAN

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Warren-Alvarado-Oslo Schools recognizes that with the implementation of a district issued device for grades 1-12 initiative there is a need to protect the investment by both the school district and the families.

The district issued device Insurance Cost is \$50.00 **per device** and will be due upon receipt of your child's device. The district issued device insurance will be capped at \$150 for families with multiple students. This annual coverage begins upon the receipt of payment (if chosen) or the completion of the Free/Reduced application, and ends at the end of the school year.

**IMPORTANT: If you fill out the free/reduced application for 2021-2022 school year in its entirety and get a signature from a school administrator or Missy Jones, WAO Food Director, your insurance cost will be waived completely!**

The district issued device insurance will provide insurance coverage for accidental damage (drops/spills) fire, flood, natural disasters, and power surges due to lightning. The insurance cost is an annual cost and is non-refundable. **Cracked screens due to intentional damage are not covered by insurance along with the loss of the device or accessories (including but not limited to; chargers, cases) .**

All insurance claims must be reported to Mrs. Thorstenson ([hthorstenson@wao.k12.mn.us](mailto:hthorstenson@wao.k12.mn.us)) or the building principal in a timely fashion.

Students whose family opt out of the insurance option will not be allowed to take the district issued device off school property. Those machines must be checked in and out of The Media Center each day.

Intentional Damage: Students/parents are responsible for full payment of intentional damage to district issued devices. School district issued device Insurance DOES NOT cover intentional damage of the device.



**Please return this section along with your fee or Free/Reduced Application:**

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**District issued device Protection Insurance Plan:**

I have read all the policies and guidelines in the Warren-Alvarado-Oslo Schools district issued device agreement and understand my responsibilities.

Student Name (print):

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Parent Name (print):

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Parent Signature:

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Grade in School: \_\_\_\_\_ Date: \_\_\_\_\_

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**Choose One Option Below**

Amount of payment collected: \$50/device  Free/Reduced Application Filled out in its entirety (Fee 100% waived)

Family Cap Reached (\$150.00)

Collected on: \_\_\_\_\_

Collected on: \_\_\_\_\_

Collected by: \_\_\_\_\_

Collected by: \_\_\_\_\_

I choose to Opt out of the insurance offered to me, even though it is free for filling out the Free/Reduced application. I also understand my child will not be allowed to take home their device and will need to check their device in and out each day at school.

