

BBSD ACCEPTABLE USE AGREEMENT AND PARENT PERMISSIONS

Please fill out a separate form for each student in your family using blue or black ink. This form must be completed and signed by the student and parent/legal guardian before a device will be issued to the student. Elementary students can print their name on the signature line.

LAST NAME of STUDENT (please print)

FIRST NAME of STUDENT (please print)

School Building (Elroy, Moore, Middle, High)

Grade Level

LAST NAME of PARENT/LEGALGUARDIAN (please print)

FIRST NAME of PARENT/LEGAL GUARDIAN (please print)

Home Address

City, State, Zip

Phone

Email Address

Student:

Network: As a user of the Brentwood School District computer network, I hereby agree to comply with the statements and expectations outlined in the Brentwood Borough School District Student Network/Internet User Agreement and to honor all relevant laws and restrictions. I also agree to use the network responsibly.

Device: Having fully read the Brentwood Borough School District device agreement, I understand my responsibilities for caring for the computer, and I agree to the terms regarding the device I will receive from the Brentwood Borough School District.

STUDENT SIGNATURE

DATE

Parent:

Network: All students are provided with access to district computer resources. In addition to accessing our district computer network, as the parent or legal guardian, I grant permission for my student to access the Internet. These permissions are granted for an indefinite period of time unless otherwise requested. I understand that individuals and families may be held liable for violations. I understand that some materials on the Internet may be objectionable, but I accept responsibility for guidance of Internet use and will set standards for my child(ren) to follow when selecting, sharing, or exploring information and media.

Device: Having fully read the Brentwood Borough School District device agreement, I understand my responsibilities for caring for the computer, and I agree to the terms regarding the device my child will receive from the Brentwood Borough School District.

Device Return: I understand that the device and charger must be returned to my child's school on the last day of school each academic year or on a date pre-determined by school administrators. Failure to turn in the device and charger may result in the collection being turned over to the magistrate and my child will be prohibited from participating in any extra-curricular activities including, but not limited to, athletics, clubs, after school events, graduation, and/or anything beyond the regular school day or curriculum. I also understand that a new device will not be issued to my child until any outstanding device obligations have been satisfied.

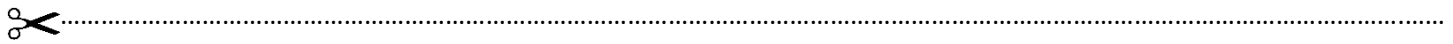
PARENT/GUARDIAN SIGNATURE

DATE

2024-2025 BBSD TECHNOLOGY PROTECTION PLAN

This is an optional and voluntary program available to all students. Please fill out the bottom portion in blue or black ink and return to the middle/high school office. Retain the top portion for your records. **This form must be completed and marked YES (with payment attached) or NO for each student before a device will be issued to the student(s).**

<p>Coverage and Benefits</p> <p>This agreement covers the BBSD device loaned to the student and any temporary devices loaned to a student, not including daily loaners, against some incidents of accidental damage. The following items are NOT covered:</p> <ul style="list-style-type: none"> A device that is lost or stolen. Damage caused by negligence including, but not limited to leaving it outside in an automobile, immersion in liquid, any type of damage caused by food or liquid, damage caused by pets, rough/inappropriate handling, etc. Intentional misuse of one's own or a peer's device More than one accidental incident, including more than one broken screen or accessory Loss of power adapter/cord <p>It is agreed and understood that:</p> <ul style="list-style-type: none"> It will be the right of the principal or his/her designee to determine if damages were due to negligence or accidental in nature. The principal reserves the right to determine the cost of repair/replacement and to assess such charges. Students must clear all device fees before participating in school-related events, including attendance at sports, dances, and graduation. Students will not be issued a new device until all fees are satisfied. The principal will review all damages determined to be from misuse or negligence and will assess student's continued privilege of taking the device to and from school. 	<p>Effective and Expiration</p> <p>This coverage is effective from the date this form and payment are received by the school through the date when the device is to be returned in good working condition to the school or at least by the end of the current school year.</p> <p>Premium</p> <p>The current total premium cost is \$30 paid annually. The premium for students that qualify for free and reduced lunch is \$15 (per student) paid annually. Partial semesters/years are not refundable.</p> <p>The current replacement costs for devices not covered under this insurance plan is:</p> <ul style="list-style-type: none"> Charger - \$30.00 Screen damage - \$50.00 Chromebook - \$225.00 Surface Laptop - \$248.00
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2024-2025 BBSD TECHNOLOGY PROTECTION PLAN ELECTION FORM

Please list all students in your family and your election of coverage for each student (if you need additional space, please fill out an additional form).

STUDENT NAME	GRADE	<input type="checkbox"/> YES, I would like coverage. <input type="checkbox"/> NO, I am declining coverage.
STUDENT NAME	GRADE	<input type="checkbox"/> YES, I would like coverage. <input type="checkbox"/> NO, I am declining coverage.
STUDENT NAME	GRADE	<input type="checkbox"/> YES, I would like coverage. <input type="checkbox"/> NO, I am declining coverage.

<p>Select the payment amount below:</p> <p><input type="checkbox"/> One student \$30.00 per year</p> <p><input type="checkbox"/> Students currently eligible for free and reduced lunch \$15.00 per child per year</p>	<p>Select the payment type below:</p> <p><input type="checkbox"/> Cash</p> <p><input type="checkbox"/> Check (made payable to "Brentwood Borough School District")</p> <p><input type="checkbox"/> Credit Card - RevTrak Payment Website: http://bbsd.revtrak.net/</p>
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I have read and understand the rules and the financial responsibilities of the BBSD Technology Protection Plan. I agree to all terms and conditions of the program and voluntarily enroll my student(s) or decline my student(s) as noted above for the current school year.

PARENT/GUARDIAN SIGNATURE	PARENT/GUARDIAN PRINTED NAME	DATE
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