

VCSC Electronic Device Student/Parent Contract

As Parent/Guardian of _____ (student name and graduation year), we understand and accept the responsibility of participation of my student in the VCSC technology/electronic device program. If the device is damaged, stolen or lost while issued to my student, I/We understand that I/We could be responsible for restitution to bring the iPad to original condition.

Signed: _____ Parent Date: _____

Signed: _____ Student Date: _____

_____ Yes, I will allow my student to take the school issued device home.

_____ No, I will only allow my student to use the device while at school.

Voluntary Insurance Program

The VCSC funded insurance program costs **\$20 per student** or **\$30 per family** per school year, with a deductible. Each student will be allowed **one** repair incident per year for a damaged screen, cable or case. Other physical damages, intentional vandalism, lost, or stolen items will remain the responsibility of the student and parent/guardian. Once enrollment money is paid, the insurance will take effect **fifteen (15)** days after payment is received.

Listed below are the out of pocket costs and the cost with insurance:

	Broken Screen	Cord	Case
Without Insurance	\$100+	\$25	\$30
With Insurance	\$20	\$10	\$5

_____ Yes, I/We would like to participate in the insurance program

_____ No, I/We decline insurance.