



Douglas County School System

One-to-One Learning Device

User Agreement

This User Agreement is required to be completed, signed and returned in order for a DCSS learning device to be issued to the student. If you have questions or concerns about your student using a device, please contact the school administration.

Student Name (print) : _____

Learning Device Serial Number (on a Chromebook this can be found by pressing ALT+V)

Please read this agreement before signing below.

I authorize the check-out of a learning device and a charger to my child for the purpose of completing digital learning assignments. I/we understand that the learning device is to be used for educational purposes only. In addition, I understand that the learning device is property of the Douglas County School System. At any time, DCSS reserves the right to request the return of the learning device. My child will comply with the DCSS Acceptable Use Regulation IFBG-R1 as found in the Policy Manual at www.dcssga.org. I understand that my child will be held responsible for returning the technology equipment in the same condition as issued. I understand that I will be financially responsible for up to \$250.00 for the loss of or damage to the learning device. In the event of lost or damaged equipment, I understand a report must be made immediately to school personnel. If the device is stolen, I understand that I must also file a police report immediately. If my child transfers to another school within the Douglas County School System, the equipment will be returned to the issuing school before leaving. If my child transfers out of the Douglas County School System, the learning device and charger will be returned to the issuing school before leaving.

Student Name (print) _____

Student Signature _____ Date _____

Parent Name (print) _____

Parent Signature _____ Date _____

Best phone # to reach parent: _____

Parent email address: _____