2014-2015 iPad Acceptance Form

Name: _________________________________  
Student ID#: _________________________________

School: ________________________________  
Grade: ______________

ipad Acceptance

I understand that the iPad and/or accessories that EACS has provided my child are the property of East Allen County Schools. I understand that we will report any damage, loss, or theft of the iPad to EACS personnel immediately. In addition, I understand that I may be held responsible for reimbursement for loss, damage, or repair of my child’s iPad, which may have occurred at school or at home, or while the iPad was being transported, in accordance with the policies outlined in the EACS Student Technology Handbook. **ALL iPad REPAIRS MUST BE SUBMITTED TO EACS TECHNOLOGY DEPARTMENT. ANY REPAIR ATTEMPTED BY OTHER MEANS WILL RESULT IN FULL REPLACEMENT COST.** The iPad has been checked by a technician, and may have slight scratches, dents, and blemishes. The damage will not affect iPad performance.

___ Insurance Paid in Full ($30.00) NO PARTIAL PAYMENT OPTION. See reverse side for coverage details. Please make checks payable to the school.

___ Insurance Declined (I understand that by declining the optional insurance on the iPad, I am responsible for the full amount of the lost or stolen iPad and all ACTUAL repair costs. See Student Technology Handbook for the individual costs.)

Parent Signature

____________

Date

Amount Received: __________________________________

Received by: ________________________________

DISTRICT COPY

Technology Department
1000 Prospect Avenue
New Haven, IN 46774
Telephone: 260-446-0129
Facsimile: 260-446-0126

PARENT COPY (Please retain for your records)

2014-2015 iPad Acceptance Form

Name: _________________________________  
Student ID#: _________________________________

School: ________________________________  
Grade: ______________

ipad Acceptance

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Parent Signature

____________

Date

Amount Received: __________________________________

Received by: ________________________________

PARENT COPY (Please retain for your records)
ALL STUDENTS WILL BE RESPONSIBLE FOR THE COST OF DAMAGE, LOST OR STOLEN IPADS.

IF INSURANCE PAYMENT ($30) RECEIVED – Incident deductible and reimbursement costs for lost, stolen or damaged iPad: (Parents declining insurance initially have the right to purchase insurance at a later date. The iPad must be inspected and approved by an EACS technician.)

- **First Incident**: Parent will pay $100 deductible for lost, stolen or damaged iPad.
- **Second Incident**: Lessor of cost to repair the iPad or replacement cost. (Loss of take-home privileges)
- **Third Incident**: Lessor of cost to repair the iPad or replacement cost. (Loss of iPad privileges)

Full Replacement cost for iPads:

*Grade 9-12: iPad 3 (32G) $599.00  Grade 7-8: iPad 3 (16G) $499.00  iPad 2 (16G) $399.00*

See *Student Technology Handbook* for Table of Estimated Repair Pricing. The *Student Technology Handbook* is also available on the EACS website, and is located under the Parents’ tab. (http://www.eacs.k12.in.us/parents/student_technology_handbook)