## LAKE SHORE CENTRAL SCHOOLS

**EVANS-BRANT CENTRAL SCHOOL DISTRICT** 

DISTRICT OFFICE: 959 BEACH ROAD, ANGOLA, NEW YORK 14006-9782

On Beautiful Lake Erie

STUDENT ADDRESS:

All Schools 716-549-2300 Fax 716-549-6407 www.lakeshorecsd.org

SENIOR HIGH 959 BEACH ROAD ANGOLA, NY 14006-9782 716-926-2307 FAX 716-549-4033 MIDDLE SCHOOL 8855 ERIE ROAD ANGOLA. NY 14006-9624 716-926-2400 FAX 716-549-4374 ANTHONY J. SCHMIDT 9455 LAKE SHORE ROAD ANGOLA, NY 14006-9400 716-926-2350 FAX 716-549-4428 HIGHLAND 6745 ERIE ROAD DERBY, NY 14047-9698 716-926-2460 FAX 716-549-2337 JOHN T. WAUGH 100 HIGH STREET ANGOLA, NY 14006-1300 716-926-2370 FAX 716-549-2380 TRANSPORTATION 8710 N. MAIN STREET ANGOLA. NY 14006-9603 716-926-2240 FAX 716-549-4369 W. T. HOAG EDUC, CENTER 42 SUNSET BOULEVARD ANGOLA, NY 14006-1000 716-926-2480 FAX 716-549-4391

## PERSONAL LEARNING DEVICE SIGN OFF FORM

Please read and review the guidelines and agreements for your student to be assigned a personal learning device. The full guidelines and agreements can be found here: <a href="User Guidelines">User Guidelines</a>
You can also find them at www.lakeshorecsd.org/Services/Technology Services/Personal Learning Device Program

NOTE: You must SIGN and RETURN this form BEFORE you can receive a device.

(Parent/Guardian Signature) (Date) ONE FORM PER STUDENT	
Please check the box and sign below indicating you agree to and understand the 1 to 1 sign off form	
<ul> <li>I agree NOT to remove any District labels or stickers and NOT add any personal stickers</li> <li>I agree to ONLY use a DRY MICROFIBER cloth to clean the screen, not spray anything on the screen and not to use paper towels, napkins, shirts, or household cleaning products.</li> <li>I agree that this Chromebook and Charger may be transported to and from School and may be used at home. This agreement and policy extend to use of the device when not on site.</li> <li>I agree that if the Chromebook and/or Charger is lost or damaged due to neglect, that I have a fiscal responsibility to replace the Chromebook and/or Charger in full.</li> <li>Replacement chargers will cost \$20.00</li> </ul>	_
<ul> <li>Schools District. By checking the box and signing this form, you <u>AGREE</u> to the following:         <ul> <li>I agree that the Chromebook/Charger are my responsibility as long as they are in my possession and will be charged daily. The school is not responsible for charging my Chromebook.</li> <li>I agree that any electronic data on the Chromebook is considered District Property and subject to the Policies therein pertaining to Acceptable Use.</li> <li>I agree that the Chromebook/Charger will only be used by Lake Shore Central School District</li> </ul> </li> </ul>	
Device Loaned: ONE Chromebook and ONE Chromebook Charging Brick/Cable  This document certifies that I have signed out the device listed above from the Lake Shore Central	
Please circle School and Grade Level: AJS HLD JTW WGHMS HS - K 1 2 3 4 5 6 7 8 9 10 11	12
PARENT/GUARDIAN EMAIL ADDRESS:	
PARENT/GUARDIAN PHONE NUMBER:	
STODENT ADDRESS.	