



Technology Checkout Procedures

Northeast South Dakota
HEAD START PROGRAM
200 South Harrison St #1 Aberdeen, SD

Northeast South Dakota (NESD) Head Start parents and employees are provided the opportunity to checkout laptops/tablets that are the property of NESD Head Start so that they may continue using the technology away from center facilities. These laptop/tablets are to be used only for educational or work purposes. No parent, student or employee should use an NESD Head Start laptop/tablet for personal use of any kind. The following procedures will serve as guidelines for use of NESD Head Start laptops/tablets to parents and employees.

All parents and employees will be required to sign this form acknowledging that they have read and agree with NESD Head Start laptop/tablet checkout procedures before a laptop/tablet can be checked out.

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- ___ 1. All use of the NESD Head Start laptops/tablets must be for educational purposes. Parents, students and employees are not to use the computers for personal, commercial or business use.
 - ___ 2. Parents and employees who check out a laptop/tablet assume full responsibility for basic care of the device.
 - ___ 3. Parents and employees who check out a laptop/tablet assume full responsibility for security of the device on and off center premises.
 - ___ 4. Parents and employees who check out a laptop/tablet assume full responsibility for reporting device problems, breakage or damage immediately.
 - ___ 5. **Parents and employees who check out a laptop/tablet assume full responsibility for repair cost due to intentional damage or damage due to neglect.**
 - ___ 6. **Parents and employees who check out a laptop/tablet assume full responsibility for the replacement cost of the laptop/tablet in the event the parent or employee loses possession of the laptop/tablet for any reason or in the event the laptop is destroyed or rendered useless due to damage while in the care of the parent or employee, including loss of use due to theft, fire, flood, lightning, or any other cause.**
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I have read the Laptop/Tablet Procedures above and agree to comply with them as stated. I also understand that any violation of these procedures may constitute in me or my child not having future access to a laptop/tablet for use away from center facilities.

DEVICE TYPE: _____ SERIAL/TAG NUMBER: _____

DEVICE: CHARGER: BAG: LOCATION: _____

I accept full responsibility for the replacement cost of the laptop/tablet I have checked out in the event of any loss or damage to this equipment in the amount determined by NESD Head Start.

PRINTED NAME: _____ DATE: _____

SIGNATURE: _____ ADDRESS: _____

CELL\HOME PHONE: _____ CITY: _____