

**South Western School District
District-Owned Electronic Device (Laptop) Optional Protection Plan**



District-Owned Electronic Device (Laptop) Optional Protection Plan for the 2016-2017 School Year

South Western School District recognizes that with the distribution of an electronic device (laptop) to support customized learning and increased access to learning opportunities, the priority is to protect the investment by both the District and the Learner/Parent/Guardian. The following information outlines the various forms of protection: warranty, accidental damage protection and optional protection plan. Please refer to the Agreement for District-Owned Electronic Device (Laptop) Use for additional information.

Terms of the District-Owned Electronic Device (Laptop) Optional Protection Plan

An optional non-refundable one-school-year protection plan is available for district-owned electronic devices (laptops). The per school year Optional Protection Plan costs \$30 for families with one learner, \$50 for families with two learners and \$60 for families with three or more learners assigned a district-owned electronic device (laptop). Make check payments payable to SWSD. **The plan will cover any repair totaling less than \$30.00.** The plan will **also** cover **the first incident** per learner per school year **over \$30.00 including** parts and repairs due to accidental damage and system-related issues occurring through normal use. Any **additional** replacement or repair will cost the learner/parent/guardian the full cost of the repair or the Full Market Value of the device (estimated at \$325.00). Please note: theft, loss, replacement charging bricks, cords and cases are not covered through this plan.

User Misuse Not Covered by Optional Protection Plan

Learners will be responsible for the entire cost of replacement or repair for district-owned electronic devices (laptops) damaged through active or reckless misuse, abuse, or intentional damage.

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The fiscal year for the Electronic Device Optional Protection Plan begins on August 30, 2016 and ends on August 29, 2017.

Yes, I would like to purchase the one-year Optional Protection Plan for the district-owned electronic device (laptop) assigned the learner(s) in our family. Cash payments may be made with this form. Online credit or debit payments may be made at <https://southwestern.revtrak.net/> A service fee (3.70%) is added to debit/credit payments.

1 learner family 2 learner family 3 or more learner family

No, I choose not to purchase the Optional Protection Plan and accept all financial responsibility for the district-owned electronic device (laptop) assigned to the learner(s) in our family. I agree and acknowledge I will be responsible for the full cost of repair or replacement as set forth above. **Any repair totaling less than \$5.00 will not be charged. The District reserves the right to pursue all available legal remedies to enforce this obligation and collect the money owed.**

Office Use Only: Amount Paid: _____ Balance: _____
Cash: _____ Check: _____ Credit Card: _____
Accepted by: _____ Date: _____

Learners Covered by the Optional Electronic Device (Laptop) Protection Plan

Parent/Guardian Signature: _____ Date: _____

First & Last Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

1. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

2. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

3. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

4. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

5. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

6. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

7. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____

8. Building - *circle one*: _____ SWHS EHMIS BA MA PH WM

Learner Signature: _____ Date: _____

Learner Full Name - *print*: _____ Learner ID - *lunch #*: _____