

This form must be completed before a laptop is issued.

Plymouth School District Laptop Checkout Form
2022-2023 School Year

Student Name: _____ Grade or Grad Year: _____
(Please Print)

Panther Time Teacher: _____ Panther Time Room #: _____

Please sign ONE of the options below.

Yes, I would like to purchase protection plan coverage.

I understand that the laptop issued by Plymouth School District is the property of the school district and must be turned in when requested. I understand I am responsible for the **\$25.00 premium per year**, the premium may be paid at registration or a \$25.00 check must be attached at the time of laptop checkout. **Payment will not be accepted at a later date! Insurance will not be available after initial checkout. Only one screen replacement will be covered under insurance per year, per student.** We have read the Manual of Acceptable Communication and the PHS laptop Rules and Procedures.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

OR

No, I do not want to purchase protection plan coverage.

I understand that the laptop issued by Plymouth School District is the property of the school district and must be turned in when requested. I opt NOT to participate in the school district protection plan coverage. By doing so I accept FULL responsibility for the laptop should it be damaged. We have read the Manual of Acceptable Communication and the PHS laptop Rules and Procedures.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

*****Note*****

Students must keep track of their inventoried, assigned charger. If their issued charger is not turned in, charges may be incurred.

*****Office Use only*****

Laptop AV# _____ Charger AV# _____