

**This form must be completed before a laptop is issued.**

Plymouth School District Laptop Checkout Form

2023-2024 School Year

Student Name: \_\_\_\_\_ Grade or Grad Year: \_\_\_\_\_  
(Please Print)

Panther Time Teacher: \_\_\_\_\_ Panther Time Room #: \_\_\_\_\_

**Please sign ONE of the options below.**

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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# \_\_\_\_\_**