



# **Saint Rose Catholic School**

## **2020-2021 iPad Policy**

**We have read the Saint Rose Catholic School iPad Acceptable Use Policy and agree to follow the rules contained in this policy.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## Insurance and Financial Liability

I accept full financial responsibility for any repairs or replacement of the issued device. I also understand that purchasing insurance is an option, and if I choose to do so will undertake this on my own.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## Devices From Home

I have decided to use a device owned by me, \_\_\_\_\_, and give permission to St. Rose Catholic School to supervise the device, install software, and add restrictions through a Mobile Device Management system.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## For Technology Department

## Liability Waiver Signed

Fees paid Date:      Amount:      Check:      Credit:

## iPad Policy signed by parent and student

## Case Provided