2024-2025 O to a a a WavrorStu ts

Cabell County Schools is offering an optional damage/loss waiver for our Student Tech Empowerment Plan. The annual (ust b r w a h s hoo y ar or a r a t v u to oss s ssu) fee is completely optional for those that want protection from expenses due to damage/loss/theft of the student-issued iPad or Macbook. If you choose to participate in the optional damage waiver program, Cabell County Schools will waive your financial responsibility above and beyond the deductible (see below) for each covered incident occurring to the iPad or MacBook in that school year.

To obtain a waiver:

- 1. Agree to the terms and conditions of the Optional Damage Waiver Program.
- 2. Â
- 3. Payments will be processed at the school via cash, check, or credit/debit card. Please make checks payable to Cabell County Schools

2024-2025 Cabell County Schools Optional Damage Waiver Program Terms and Conditions

I hereby acknowledge that my child has been and/or will soon be issued an electronic device by Cabell County Schools for the sole purpose of enhancing his/her education and I am wholly and entirely responsible for loss or damage to this district-owned device. I will ensure that my child will use this device in accordance with all policies and procedures, bring it to school daily, and will do everything to protect it from damage, loss, or theft. In order to decrease the possible financial responsibility on myself for damage, loss, or theft, I fully accept the Cabell County School's offer to partially waive my financial responsibility for future damage/loss/theft, subject to terms, conditions, and deductibles outlined in this agreement and agree to pay the per school year fee based on device issued.

- < \$30 for iPad
- < \$50 for Macbook

I understand there are certain conditions not covered by this damage waiver which include:

- 1. Any dishonest, fraudulent, malicious, or criminal acts.
- Any loss to software, data, documents, music, videos, recordings, or other personal information saved on the device. 2.
- Damage/loss/theft caused by failure to use all reasonable means to protect the device. 3.
- Loss of the device not reported to the school or district within 24 hours. 4.
- 5. Theft of the device not reported to the school/district and law enforcement within 24 hours.
- 6. Any use resulting in damage/loss/damage that does not adhere to the Cabell County Schools' policies and procedures.
- 7. Failure to bring the device to school daily for check-ins may void this agreement.

utb s

I am responsible for a per-occurrence deductible for each claim covered under this agreement and agree to pay the incident fee immediately upon confirmation of damage/loss/theft. The confirmation of loss will be determined at Cabell County Schools' sole discretion. I understand that Cabell County Schools reserves the right to revoke any and all of my or my child's privileges under this program should there be evidence of careless and/or destructive behavior on my or my child's part.

a a odvic	Losso d vic (iPadorMacBook	Th to d vic (rportro a
< \$49 first incident	ocatio isu k ow a da idavit	orc trquird)
 \$49 second incident \$99 for each subsequent incident 	 o oss or i d with schoo) \$49 first incident \$99 second incident \$149 for each subsequent incident 	 \$49 first incident \$49 second incident \$149 for each subsequent incident

*Payment is non-refundable and no prorated payments for late school enrollment will be allowed. By signing this form, you are agreeing to the terms and conditions above and have enclosed the non-refundable payment enrolling you in the Cabell County Schools Damage Waiver Program. I understand that the annual (each school year per issued device) Damage Waiver fee must be submitted no later than 14 days after the student's first day of school or the receipt of the device and that the waiver does not take effect until the school receives the payment.

Student ID #: _____ Student Name: School: Parent Name: _____ Parent Signature: ____ Date: Payment: Cash / Check / Credit or Debit Card Amount: Please make checks payable to Cabell County Schools. For School Use Only: I verify that I have seen the student's iPad or MacBook and that it does in fact belong to that student and is in good condition/working order. (No physical damage)

Name of Teacher/Administrator:

Date:

ลพ