



Dougherty County School System

DISTRICT TECHNOLOGY PROPERTY CHECKOUT AGREEMENT

While the primary purpose of the Dougherty County School System technology equipment is for use on site during the instructional/work day, there are times when it is appropriate for staff and students to check out equipment to be used for educational purposes beyond the work day and outside of the work environment. All staff members or students/parents/guardians will be required to sign this form before technology equipment can be taken to a location other than a District facility. This Checkout Agreement is limited to the following items:

- Calculators, Scientific
Camera Devices
Computing Devices (including hand-held devices)
Printing Devices
Probeware
Projection Devices
Scanning Devices

By completing and signing this form, we acknowledge and agree as follows:

- 1. All use of the District's technology equipment will be for educational purposes. For employees this includes attending professional workshops, conferences or meetings. At no time will the equipment be used for personal, commercial or business use, or for political or religious reasons.
2. To abide by the provisions of School Board Policy IFBG (computer/internet user policy). With respect to computers, this includes no unlawful copying/distributing of software or documentation provided with the computer and no use of the computer to unlawfully copy any software.
3. To make no unauthorized changes to the equipment's configurations. For computers, this means no adding, removing, or adjusting any computer software or hardware.
4. To use ordinary care and diligence in protecting, safeguarding, and supervising use of the equipment and returning it to the District in the same condition it was in prior to checkout, excluding normal wear and tear, and to assume liability for any damage, loss, or theft of the equipment while in my care.
5. To have, if a student, a parent/guardian sign for responsibilities of the equipment while it is in my possession.
6. To participate in training in the use and care of technical equipment as provided by the appropriate school or District staff member prior to checking out the equipment.
7. To return the technology equipment to school or my work place for use as required by the teacher or administrator.
8. To return the technology equipment:
a. On or before the due date on this agreement;
b. Prior to the due date if requested by the authorizing supervisor/department head;
c. When withdrawing, if a student, or resigning or otherwise terminating employment, if an employee, with the District; and/or
d. In the same condition the item was in at the time of check out.

ITEM INFORMATION

(To be completed by Supervisor/Department Head authorizing the check-out)

Item Checked Out: From School/Department:

Type: Brand: Model:

Serial Number: DCSS Asset Number:

Replacement Value: \$

Name of Authorizing Supervisor/

Department Head (please print): Phone Number:

# USER AGREEMENT

## USER INFORMATION (To be completed by student and or parent/guardian)

Name of Individual Checking Out the Item (please print): \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

## PARENT OR GUARDIAN AGREEMENT

If you are a student under 18, a parent/guardian must also read and sign this agreement prior to your checking out the equipment.

Parent/Guardian Name (please print): \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

*I/we have read and agree to comply with the Technology Equipment Check Out Agreement I understand that any violation of the procedures may result in me or my child not having access to equipment for use away from District facilities. I also understand that I assume accountability and responsibility for any equipment I check out. I understand that I am personally liable for:*

- *The replacement cost of the item, as indicated above, if the item is not returned; or*
- *The amount required for repair or replacement parts, if the item is damaged when returned. I agree to release, indemnify, and forever discharge the Dougherty County Board of Education, Dougherty County School District, its successors and assigns, its agents and employees and all other persons, firms, or corporations, who are or might be liable in any way, from and against any liability or responsibility whatever of any kind and nature, arising from and by reason of use of Dougherty County School System's equipment and participation in its check out.*

Date: \_\_\_\_\_

User Signature: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

## PRINCIPAL/DIRECTOR CONTACT INFORMATION

Name (Please print): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Due Date: \_\_\_\_\_

Principal/Director Contact Person Signature: \_\_\_\_\_