## ROCK HILL SCHOOLS TECHNOLOGY PROTECTION PLAN

To help sustain the technology investment and offset repair cost ROCK HILL SCHOOLS has implemented a technology protection payment plan. The technology protection payment of \$35 will entitle the student to a one time replacement for unintentional damage or repair. This does not cover intentional damage to the device or lost computer chargers. Families with financial hardships may be eligible for a payment waiver. For additional information see the RHS Mobile Computing Guide or visit the district website. **All students/parents must have this completed form on file prior to a technology device being issued.** 

- The RHS Mobile Computing guide is available at https://tinyurl.com/RHSMCG.
- The Use of Internet/Student Assurances is available at https://tinyurl.com/RHSUISA.
- The Parent Orientation is available at: http://tinyurl.com/RHSPOV.

DATE/AMOUNT

## PLEASE CHECK ONE OF THE OPTIONS BELOW AND RETURN THIS FORM TO YOUR CHILD'S SCHOOL

□ I have enclosed the \$35 technology protection payment for the 2020 - 2021 school year. □ I will pay the \$35 technology protection payment online through my child's school. (High Schools only at this time) Additional processing fees apply for online payments. □ I request a waiver of the payment. I agree and release the school or district personnel to verify the PIP list for approval. □ I decline the \$35 technology protection plan and accept full responsibility for damaged or loss of the district's mobile device. My student will use the computer provided at school. □ My child will bring his/her personal device to school.  I understand that my participation in any violation of the guidelines set forth in District-owned electronic device agreement, student-owned electronic device agreement, or use of internet/student assurances will result in disciplinary action and possible loss of access privileges to such resources, depending on the nature of the offense.  By signing below, I have participated in the parent orientation and agree to the stipulations set forth in the Personal Mobile Computing Guide, ROCK HILL SCHOOLS Acceptable Use Policy, District-Owned Electronic Device Agreement, Student-Owned Electronic Device Agreement and Use of Internet/Student Assurances.			
		School Date	Grade
		Student's name (Last, First, Middle) Please print	Advisor/Homeroom
		Student's Signature	Parent/Guardian's Signature
		Parent/Guardian's E-mail address	Parent/Guardian's Phone Number
		RECEIPT#	
WAIVER APPROVED			
PAYMENT PLAN			
DATE/AMOUNT			
CASH CHECK#			
FOR OFFICE USE ONLY ENTERED INTO POWERSCHOOL			

I agree to the stipulations set forth in the Personal Mobile Computing Guide, ROCK HILL SCHOOLS Acceptable Use Policy, District-Owned Electronic Device Agreement, Student-Owned Electronic Device Agreement and Use of Internet/Student Assurances. I understand that my participation in any violation of these guidelines will result in disciplinary action and possible loss of access privileges to such resources, depending on the nature of the offense.

## STUDENT ASSURANCES

When using ROCK HILL SCHOOLS School District network or Internet resources, I will:

- 1. Use the Internet for legitimate educational purposes.
- 2. Not register the name, home address, or telephone number of myself or anyone else in any location on the Internet.
- 3. Use messaging only at the direction of my teacher or as it relates to my coursework.
- 4. Not search for, download or print any material that violates school handbook codes regarding possession or display of inappropriate, offensive or vulgar material, or assist any other student in such activities.
- 5. Not harass, insult, attack, or bully others via electronic communications.
- 6. Not damage or alter digital devices, computer systems, or computer networks.
- 7. Not violate copyright laws.
- 8. Not trespass in another's folders, work, or files.
- 9. I will keep my usernames and passwords protected.

I understand that my participation in any violation of these student assurances will result in disciplinary action and possible loss of access privileges to such resources, depending on the nature of the offense.

Student Name (Print) Student Signature School

As parent/legal guardian, I give permission for my student to access RHSD network or Internet resources under the conditions described above.

Parent Signature Date

Please sign and return this sheet to your child's teacher or school administrator. Thank you.