By signing this form I, the undersigned, acknowledge I have read the following documents and understand the basic use and care of the device issued by the Corinth School District.

☐ Acceptable Use Policy		
☐ Device User Agreement		
☐ Technology Replaceme	ent Costs and Fees	
User Printed Name	User Signature	Date
 Parent / Guardian Printed Name	Parent / GuardianSignature	Date
School	Asset Id	