



**MONROE COUNTY INTERMEDIATE SCHOOL DISTRICT  
DEVICE LOAN AGREEMENT FOR EDUCATIONAL HOME USE**

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Parent/Guardian Email Address:** \_\_\_\_\_

**Assistive Technology Identification Number:** \_\_\_\_\_

**Type of Device (iPad, reading pen, etc.):** \_\_\_\_\_

Parent/Guardian will be responsible for any repair or replacement of the borrowed device and any provided accessories.

**TERMS OF AGREEMENT**

The Monroe County ISD agrees to loan assistive technology for student educational home use. The student/parent and/or guardian agree to the following terms:

- I understand that I am responsible for the replacement value if the device is stolen or lost.
- I understand I am responsible for the repair costs of the device if damaged during this borrowing period.
- I understand the device remains the property of the Monroe County Intermediate School District.
- I agree to return the device to MCISD in the same condition it was issued to student.
- I have read the MCISD User Policy Agreement.
- I will immediately notify MCISD if the device is lost, stolen or damaged.
- I will ensure the device is used for educational purposes only.
- I will not modify the device in any way. This includes repair, maintenance, installing or deleting software or applications.
- I will obey all Copyright Laws.

**Violation of the above policies will result in immediate termination of the loan.**

\_\_\_\_\_  
**Parent Guardian Signature** **Date**

\_\_\_\_\_  
**Student Signature (if over 18)** **Date**



*MCISD Device Loan Agreement Online Form*

<https://tinyurl.com/MCISDhomeuse>