

## **ELECTRONICS AGREEMENT**

I understand that the sole justification for Havre Public School District to permit a staff member to use school equipment away from the school campus is to enable that faculty member to gain or enhance skills and create instructional materials which will ultimately benefit our students.

This form is a statement of my assumption of responsibility for the Electronic item listed below. I understand that this policy is in effect during the period of time that the item is regarded as my "staff member computer". The electronic device is school property, but I am responsible for the security of that device, regardless of whether it is used in the classroom, at my place of residence or in any other location, such as a car or airport. In the event my employment/affiliation with Havre Public School District ceases for any reason, I agree to return the device to the school prior to my departure. If the school offers a purchase program I have the option to purchase the device at the District's determined price. If I fail to return the electronic item or indicate that I would like to purchase it if that option is available, I acknowledge the District will deduct the cost of the item from any or all of the final pay I may have due to me.

I understand that it is my responsibility to pay for the device if any theft or damage occurs while in my possession.

Teacher/Staff Member Name (PRINTED)	Date	
Electronics Model	Serial Number	School Tag Number
Teacher/Staff Member's Signature	Director of Technol	ogy's Signature