



CHULA VISTA ELEMENTARY SCHOOL DISTRICT

Distance Learning Device Release Form

The Chula Vista Elementary School District understands that during the COVID-19 Pandemic our students may have limited access to computers at home. While Distance Learning is not only accomplished online, we want to encourage our students to utilize all available resources and increase their learning opportunities. If you would like to check out a device for your CVESD student, please complete the form below. This form must be completed prior to checking out your device. All devices are granted on a temporary basis and will later need to be returned when school reopens.

IMPORTANT: The parent/guardian is responsible for the supervision of the student to ensure appropriate use. No website control software has been installed on this device and there should be no expectation of District controls to prevent students from accessing the internet. The District is not responsible for students accessing harmful content while the device is in their custody. The parent / guardian must follow all guidelines within the Student Internet Use Guidelines/Agreement (<https://bit.ly/2VlcUpp>). The District has the right to revoke a device that is misused or used for non-educational purposes.

Student Name: _____ Student ID#: _____
School: _____ Grade: _____

I have access to the internet at my home or address where the District device will be used.

I have read and agree to the Student Internet Use Guidelines/Agreement: (Please review the Student Internet Use Guidelines/Agreement at <https://bit.ly/2VlcUpp>)

ACCEPTANCE OF RESPONSIBILITY: Borrower agrees to return the equipment in the same condition as loaned and further agrees to reimburse the District for any loss or damage incurred while the borrower has custody. Normal wear and tear is excluded. This device is to be used for education and school-related purposes only.

By signing below, I agree to the terms and conditions.

Email Address: _____ Phone: _____
Address: _____
Printed Name: _____ Relationship to Student: _____
Parent Signature: _____ **Date:** _____

