

**RENFREW COUNTY CATHOLIC DISTRICT SCHOOL BOARD ASSUMPTION OF
RESPONSIBILITY FOR HOME USE OF SPECIAL EQUIPMENT AMOUNT (SEA)**
(Valid Only for the Current School Year)

Student Name:		School:	
School Year:	Total \$ Value of Personalized SEA:	SEA Type:	

I (Parent/Guardian/Student, if 18 years of age or older), _____ am taking full responsibility for the safe keeping of the Personalized SEA listed above that is assigned to the student named above.

I fully understand and accept responsibility for the security and safe keeping of the above listed equipment while in my possession off the premises of the Renfrew County Catholic District School Board. I agree to indemnify and hold harmless the Renfrew County Catholic District School Board for any claims, and/or damage arising out of my use of the equipment listed above.

I will ensure that:

- the equipment will be transferred safely between school and home;
- this equipment will travel back and forth to school as per rules outlined by teachers;
- only the student who this equipment has been purchased for, will use it;
- no other software will be loaded onto this equipment while off Board premises;
- this equipment will not be attached to the internet while off Board premises;
- I will carry property insurance that will respond to any loss, theft or damage to the equipment while it is in my possession, off board premises and provide proof of insurance to school Principal.

I acknowledge my responsibility for the above listed personalized SEA purchased by the Renfrew County Catholic District School Board, and agree to return the equipment in the same condition as I received it, by

Return Date (yyyy-mm-dd):

(Return Date – if not listed it will be assumed to be the last school date of the current school year shown above)

If I fail to comply with any of the above rules, I know that my equipment privileges will be immediately rescinded.

Signature of Parent/Guardian:	
Signature of Student:	
Signature of Principal:	
Date:	Property Policy Number:
Insurance Company Name:	

(Attach the signed Insurance Company Letter confirming insurance coverage of the Personalized SEA while not on school property.)

Privilege rescinded for the following reason:

_____ **Date**

_____ **Signature of Principal**