

COATESVILLE AREA SCHOOL DISTRICT

3030 C G. Zinn Road
Thorndale, Pa 19372

“Excellence in Education”

Dear Parents and Guardians,

As we move closer to distribution of the Chromebooks on **November 6, 2019**, we wanted to remind you and your students about the importance of reading over the Technology 1:1 Handbook as well as getting in your Technology Insurance Fee (TIF). Students are to be responsible when handling the device and are required to follow the Technology 1:1 Handbook usage guidelines as well as Board Policies (Board Policies [235](#)).

Your child’s Chromebook is the district’s investment, therefore should be cared for properly or you as the parent/guardian will be held liable for the damages. No student should cause intentional damage to a device. If the device or accessories are returned damaged, or not returned at all, you as the parent/guardian will be held responsible to pay for the repair or replacement of those items.

The CASD highly recommends that parent/guardians invest in protecting your child’s device whether or not they take the device home. Any student can and will be held liable for any damage to his or her device according to board policies, however by paying the TIF your student will be covered if an accident should occur. Any student with an unpaid TIF will be held liable for any accidental damages to his or her device, including on school property. ***** Financial Hardships: If the technology fee creates a financial hardship on the student or parent, please contact the Main Office about payment options.**

For additional information, please see the CASD website for the Technology 1:1 Handbook, TIF information, and 1:1 FA

IF YOU HAVE NOT YET PAID OR SIGNED, PLEASE RETURN THIS FORM TO YOUR CHILD’S SCHOOL

This will act as a signed 1:1 agreement. Check or money order may be sent in with this form. Payment may also be made via RevTrak.

- I have enclosed the TIF payment for my child for the 2019-2020 school year.
(\$40 for one student, \$80 for two students, \$100 for 3 or more students)

Student Name: _____	Building: _____	Grade: _____
Student Name: _____	Building: _____	Grade: _____
Student Name: _____	Building: _____	Grade: _____
Student Name: _____	Building: _____	Grade: _____

- I will pay via Revtrak, and am signing the 1:1 agreement below.
- I decline to pay the \$40 TIF and accept full responsibility for damaged or loss of the district’s device. I understand my child will not be allowed to bring the device home.

Parent/Guardian’s Signature _____

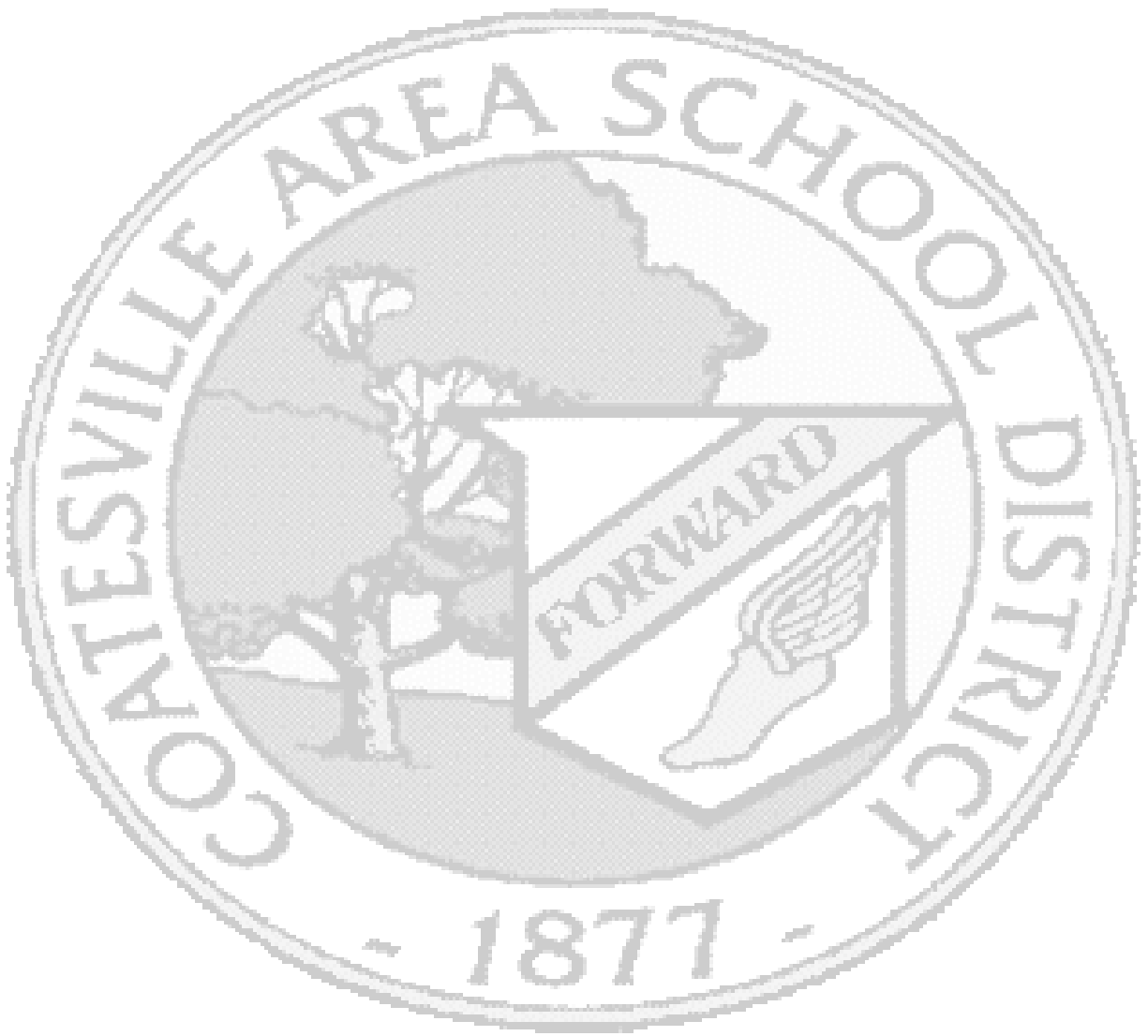
Parent/Guardian’s E-mail address _____

Parent/Guardian’s Phone Number _____

Your signed 1:1 agreement and your TIF payment are required prior to being issued a device for at home use.

The Coatesville Area School District does not discriminate in employment, educational programs, or activities based on race, sex, handicap, or national origin. This policy of non-discrimination extends to all other legally protected classifications in accordance with state and federal laws including Title IX of the Education Amendments of 1972 and Section 503 and 504 of the Rehabilitation Act of 1973.

AN EQUAL OPPORTUNITY EMPLOYER



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