

# WFISD Laptop Agreement Sign-Off Sheet

## Student Section

I have read the WFISD Laptop Agreement. I agree to follow the rules contained in this agreement. If I violate these rules, I will be required to surrender my laptop and may face disciplinary action.

\_\_\_\_\_  
Student name (print)

\_\_\_\_\_  
Grade

\_\_\_\_\_  
School

\_\_\_\_\_  
Student ID#

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

## Parent/Guardian Section

I have read the WFISD Laptop Agreement. I understand if my child violates the terms of this agreement, he/she will be required to surrender the laptop and may be subject to disciplinary action. The Wichita Falls Independent School District has my permission to issue a laptop to my child. I understand that my child will be allowed to use this laptop as long as the procedures described in the Laptop Agreement are followed.

\_\_\_\_\_  
Parent or Guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent name (print)

\_\_\_\_\_  
Home address

\_\_\_\_\_  
Phone

Equipment Description:

\_\_\_\_\_  
HP NX6110/6120 Laptop, Targus Featherlite case, power cord

\_\_\_\_\_  
WFISD Fixed Asset #

\_\_\_\_\_  
Serial #