

Hamilton County Schools

Technology Contract

Check off the boxes as you complete each section, and sign below.

☐

I have read, understood, and agree with Hamilton County's one-to-one technology expectations.

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I have read, understood, and agree with Hamilton County's one-to-one technology responsibilities.

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I have read, understood, and agree with Hamilton County's one-to-one technology student code of conduct with devices.

☐

I have been made aware of the insurance available for the device.

Student Name_____

I have read the expectations for the Hamilton County 1:1 Technology Integration. I understand what is expected of me and I agree to these terms.

Signature_____ Date_____

I understand what is expected of me and my student. I agree to these terms.

Parent/Guardian_____ Date_____