## Employee Laptop Agreement

I understand the laptop is property of Wilkes County Schools and is assigned to me.
Use of laptop by other family members is not allowed.
I will use the laptop appropriately for school purposes.
I will care for the laptop assigned to me and not leave it unsupervised in unsecured locations.
I will be responsible for all damage or loss caused by neglect or abuse.
I will not loan the laptop to another individual.
I will not use the laptop near food or drinks.
I will report the loss, theft, or the need for repairs.
I will not disassemble any part of the laptop or attempt any repairs.
I will not deface or alter the serial number sticker on the laptop.
I understand that the laptop and its contents may be inspected at any time because it is school property.
I agree to return the laptop, carrying case, power cord, and any other accessories assigned to me in working condition before my last working day with Wilkes
County Schools or upon request of school or district administration.
I will reimburse the school district for any fines caused by damage, misuse, neglect, or loss, including theft, as outlined in the Laptop Handbook.
I will follow the policies, procedures, and guidelines outlined in the Laptop Handbook and the Acceptable Use Policy at all times.
Sign and follow the Laptop Agreement.
The employee's signature below indicates that he or she has received a copy of the Laptop Handbook and understand the conditions of the program.

## School Name:

Date:

| Employee's Printed Name: | Laptop Serial Number | Employee's Signature |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Employee Laptop Agreement Signature Page Continued

| Employee's Printed Name: | Laptop Serial Number | Employee's Signature |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

