



Thomas County Assistive Technology Equipment Use Agreement

Teacher Name: _____

School: _____ Date: _____

1. I understand I am responsible for maintaining the equipment/software in working condition while said equipment is in my possession.
2. I agree to return the equipment in the same working condition that I received it to the designated personnel.
3. I agree and understand that if the technology equipment, software, and/or other related items are stolen, vandalized, misplaced, destroyed, etc. that I may be held financially responsible depending on the circumstances. (No teacher will be held responsible for damage caused by students or for matters that are beyond their control).

I agree to take responsibility for technology hardware/software listed above in exchange for the use of the equipment for educational purposes.

Signature