



## Chromebook Insurance (Opt-Out)

<b>COMPLETE THIS FORM TO OPT-OUT OF CHROMEBOOK INSURANCE COVERAGE</b>
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### Chromebook 1:1

All students entering Grade 9 will receive a new Chromebook. Students will have access to their assigned device through till graduation. The Chromebook is an educational resource provided by the Hanover School Division. Similar to textbooks and other instructional materials, HSD will supply Chromebooks to students at no cost. The Chromebook will remain the property of the school division.

### Insurance Coverage

Upon signing the Chromebook 1:1 User Agreement, students are automatically charged \$20 for Chromebook insurance (covers the school year). This non-refundable insurance premium fully protects against accidental loss/damage or theft of the Chromebook.

Insurance coverage allows for a maximum of two claims per school year. The first claim will incur no charge. A second claim will require the parent/guardian to pay an additional \$50 deductible. On the third claim, the parent/guardian will be responsible for the full cost of device repairs or replacement. If the student intentionally damages the Chromebook, any resulting insurance claim may be denied. Hardware defects or repair issues resulting from normal wear and tear will be repaired at no cost to the student and not require the use of an insurance claim. Insurance premiums and deductible terms will be reviewed annually and are subject to change.

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*By signing below, I hereby OPT-OUT of insurance coverage for my child's assigned Chromebook. As the parent/guardian of the student listed below, I assume the full risk of device loss, theft, or damage in all circumstances. In such instances, I agree to pay the lesser of device repairs or device replacement cost (approx. value \$450). I also understand that my choice to opt-out of insurance coverage applies only to the current school year.*

STUDENT NAME: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_  
OR STUDENT (MUST BE 18 YRS. TO SIGN)                      SIGNATURE                      PRINT NAME

DATE: \_\_\_\_\_

**SUBMIT COMPLETED FORM TO YOUR CHILD'S SCHOOL**