West Mifflin Area School District
One-to-One Device Parent Consent
2021-2022

This official document certifies that I have received the West Mifflin Area School District 1:1 laptop handbook and Code of Conduct, read its contents carefully. If at any time, I am unsure of the practices, procedures, responsibilities, or expectations as explained in the handbook, I will meet with my guidance counselor, principal, or teacher to clarify the matter.

I understand the contents of the handbook and I agree to abide by all of the school rules. *Parent initials confirming receipt of handbook only

Please sign acknowledging permission for student to pick up and utilize district laptop. If student withdrawals from West Mifflin Area School District laptop must be returned before leaving the district. If not, parent will be held responsible for replacing equipment.

My child, _______________________________ and I have agreed to the usage of a West Mifflin Area School District 1:1 Laptop for the 2021-2022 school year.

Parent/Guardian Name: _______________________________

Parent/Guardian Signature: _______________________________

Student Name: _______________________________ Student ID: _____________

Student Signature: _______________________________

We strongly encourage families to purchase the district insurance plan for their student’s 1:1 device. Please complete the insurance form available on the district website and in the 1:1 handbook. Make check payable to: WMASD

Office Use Only:

Asset Tag#: _______________________________ Date: _______________________