

Clover Garden Calculator Loan Agreement

Please read the agreement carefully, and sign below

NOTE: Forms must be completed every school year. (please print clearly)

Student Name: _____

School Year: _____ - _____ Grade: _____ Teacher: _____

Math Class: _____ Period: _____

Parent/Guardian Name: _____

Parent/Guardian e-mail and phone: _____

By signing below, I understand that I am responsible for bringing a calculator to class each day and for providing my own batteries throughout the course of the school year.

My student will need to check out a TI-83/84 calculator (including back plate and cover) from the school. I understand that my student is solely responsible for the safe return of the calculator at the end of the school year or transfer from school. If the calculator is **stolen, lost, or damaged**, I understand that as the parent/guardian, I am responsible for reimbursing the school a **\$130 calculator replacement fee, or \$10 for cover or back plate replacement**. My student will not be issued another calculator if theirs is **lost or damaged**. If student forgets to bring a calculator to class, a replacement calculator may or may not be available.

Student Signature Date

Parent Signature Date

MATH DEPARTMENT USE ONLY

Calculator Assigned: # _____ Serial # _____ Date: _____

Calculator condition: _____