

Distribution Checklist Contract

Student Name: _____

Class: _____

I, _____, hereby verify that
I

(name)

have received all of the following components of the Marian Central Catholic High School Student Device on August _____, 2018. I also verify that if I lose any part of the student device, I will follow protocol to pay to replace each component through Marian Central Catholic High School

Please Initial next to each item to verify you have received for your device.

_____ Device

_____ Stylus (replacement \$40)

_____ Charger and Charging Cord (replacement \$40)

(Signature)