



Merrimack School District

Missing Chromebook Acknowledgment Form

Today's Date:

Student First and Last Name:

Student's School:

Date Device Was Last Seen:

Brief Description of Steps Taken to Locate Device:

☐ I acknowledge that my student's device is missing and my student has attempted to locate this device. I understand that the school district is not responsible for a missing device, and I may incur a cost to replace this device dependent upon my student's device insurance status. If the device is found before school ends, I will return it to my student's school and any paid replacement cost will be refunded.

Parent or Guardian Name (Please Print):

Parent or Guardian Signature:

For School IT Office Use Below

Date Student Device Incident Form Completed:

Date Lost Device Disabled:

Technician: