



Roselle School District 12 is providing families the opportunity to purchase optional chromebook insurance through IT Savvy. The cost is \$28 to \$32 per device per year, with a start date of September 1, 2022.

Optional Insurance Plan 1

One year of ChromeCare Coverage which covers parts, replacement, and labor costs arising from any of the following:

- Damage resulting from unexpected or unintended events, such as dropping the device;
- Damage resulting from liquids coming into contact with the device;
- Hardware failure resulting from, for example, internal dust and overheating, power surges, and defective screen pixels, or age; and
- Normal wear and tear resulting from device manufacturer's intended use of the device

Cost: \$28 per device covered

Optional Insurance Plan 2

One year of ChromeCare Coverage which covers parts, replacement, and labor costs arising from any of the following:

- Damage resulting from unexpected or unintended events, such as dropping the device;
- Damage resulting from liquids coming into contact with the device;
- Hardware failure resulting from, for example, internal dust and overheating, power surges, and defective screen pixels, or age; and
- Normal wear and tear resulting from device manufacturer's intended use of the device

and includes loss/theft coverage (requires a valid police report to file a claim).

Cost: \$32 per device covered

*****PLEASE NOTE!*****

Accident damage protection under Optional Insurance Plans 1 and 2 **DOES NOT** cover damage resulting from any of the following:

- Using the device in a manner other than than intended by the manufacturer;
- Willful acts of abuse or misuse or the device;
- Unexplained damage, such as "keys falling off;"
- Damage due to war, acts of terrorism, fraud, or fire



1st Covered Incident	100% of the repair costs are covered
2nd Covered Incident	67% of the repair costs are covered
3rd Covered Incident	33% of the repair costs are covered
4th+ Covered Incident	0% of the repair costs are covered

Yes! I am choosing to purchase the following optional chromebook insurance plans:

_____ Option 1: One year of ChromeCare Coverage without loss/theft coverage for \$28 per device

_____ Option 2: One year of ChromeCare Coverage with loss/theft coverage for \$32 per device

x _____ Number of devices to be covered

\$ _____ Total cost due to Roselle School District 12

Please make checks payable to: ROSELLE SCHOOL DISTRICT 12

Please clearly list the first and last name(s) of the Chromebook user(s) to be covered:

Please clearly list the serial numbers of unit(s) to be covered in the space below (found on bottom of device):