Fern Ridge School District
Student Device Check-In Form

FRSD Parents and Students:

Check-In Date: _____

Device Type (Circle One): Chromebook / Hotspot / Other: _____

Device Asset Tag #: _____
(Blue 6-digit label)

Student Name: _____

Grade: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

FRSD Staff:

Overall Condition Status (Circle One): Good / Fair / Poor

Issue Description (If Applicable):

❏ Missing Charger
❏ Missing or Detached Keys
❏ Damaged or Cracked Screen
❏ Trackpad Issue
❏ Does Not Power On (No Cost)
❏ Frozen or Locked Screen (No Cost)

Additional Details: