Student Name:	Grade:
PARENTAL CERTIFICATIO	ON OF STUDENT'S INTERNET NEED WHILE OFF CAMPUS
To determine the internet needs of student read the form below and select the choice t	ts in the Beaufort County Schools District, we ask all parents/guardians to that applies to your student(s).
Check which applies and complete fields bel	low.
I certify that my student <b>does</b> have physically attending school.	e sufficient internet access for completing schoolwork when not
I certify that my student <b>does not</b> student is not physically attending school.	have sufficient internet access for completing schoolwork when the
<ul> <li>Sufficient Internet access refers to and send electronic information for</li> </ul>	Internet connectivity that is reliable and enables the student to receive or homework and online classes.
program. I understand any Wi-Fi device loa to be returned undamaged and in working lost, or stolen. My student will use the Wi-F	ring benefits under the federal Emergency Broadband Benefit (EBB) ned to my student is the property of the School District and is expected order, and I will notify the district at once should the device be damaged, if device primarily for remote learning and/or completing homework will be returned to the school if my student no longer needs or uses the
Name of Parent/Guardian:	
Parent/Guardian Signature:	Date:
**********	***************
	School Records:
	Equipment Device Serial #
	Date of Equipment/Service Loan:
	Date of Equipment/Service Return: