## LASD iPad Repair Form - include with each repair request

Date	Student Name	School	Grade	Staff Initials
Signature	Of Student	Phone Number of Stu	dent/Parent	Unlock Code
Damage to	o device:YesNo	o Payment Included:	_YesNo	Form of payment
Write a sh	ort detailed description o	f the problem (include any s	pecific error me	ssages):
		erased. Any files or settings s gle drive will not be erased.	saved on the de	vice will be deleted during
·	or replacement iPad.	gie unve will not be eraseu.		
the will	MDM but if the student h	nas tried too many times(mon The message displayed who	re than twice) th	
Fill	,	eturn form, and broken iPad	<b>3</b> ,,	re student a replacement iPac tment. Please include the \$29
======	:========	======For Office Use Or	nly=======	=======================================
Serial Nun	nber	Asset Tag (Original) _		New Asset Tag
Description	n of Repair/Repair Notes	:/Parts Used:		
Type of Re	epair:Warranty	In-House	_Third Party	Not Repairable
Repair Co	st: Parts L	abor Total	Retu	irned