



Hyde County Schools Mobile Device Incident Report

Please turn in form and device to the Ocracoke Office

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|-------------------|--|
| Student's Name: | |
| Serial Number: | |
| Password: | |
| Date of Incident: | |
| Date Reported: | |
| Parent's Name: | |
| Phone Number: | |
| Email Address: | |

Type of Incident (Please check the appropriate box)

| Accidental Damage: | Intentional Damage: | Theft with police report: | Theft without police report: | Loss of device: | Hardware Issues: | Other (describe): |
|-----------------------|------------------------|------------------------------|---------------------------------|--------------------|---------------------|----------------------|
| | | | | | | |

Who did the damage? Example: I did the damage

Where did the damage occur? Example: At my kitchen table

When did the damage occur? Example: Last night

What is damaged or not operating on the device? Example: The keys are not working.

Describe what happened to the device? Example: left in sun, spilled water on it

Student's Signature _____ Date _____

Teacher's Signature _____ Date _____

Tech Support Signature _____ Date _____