# Riverview High School

**One Ram Way**
**Sarasota, FL 34231**
**(941) 923 – 1484**
**Park Carrier**
**Mathematics Department Chairman**


## Calculator Contract

I, _____, understand that my child, _____,
**(Parent's/Guardian's Name)** **(Student's Full Name)**

has borrowed a calculator from the Riverview High School Mathematics Department. It will need to be returned to **Mr. Carrier (5-119)** at the end of the school year in working order. If my child loses, does not return, or breaks the calculator, I understand that I will owe RHS the amount necessary to replace it (as specified in the table below). If the calculator is not returned and/or the replacement cost is unpaid, I understand that my child will be issued an obligation owed. I understand that my child will not be issued any books for the next school year and/or will not be allowed to walk in graduation and will not have transcripts sent to any institution.

| Calculator | TI - 30Xa | TI - 84 Plus |
|---|---|---|
| Cost | $10 | $100 |

**Student's Name:** _____ **Grade:** _____ **Date:** _____

**Address:** _____

**Student's Signature:** _____ **Parent/Guardian's Signature:** _____

**Parent/Guardian's Phone Number:** _____

**Math Teacher(s):** _____ **Math Period(s):** _____

**Type of Calculator Requested:** _____

**Bring this form and your school ID to Mr. Carrier in room 5-119. Come before or after school please.**

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**OFFICE USE ONLY**

**Calculator Number:** _____ **Date Picked Up**_____ **Student Init.** _____

**Date Returned:** _____ **Student Init.**_____