

Wembrook Primary School

iPad Damage/Theft - Insurance Claim Form



Pupil's Name: _____ Class: _____

Date of Incident: _____ Time of Incident: _____

Incident Type: (please circle) **Damage** **Theft**

Which part of the iPad is damaged or not working? _____

Description of the incident that led to the damage. What actually happened, where was the device at the time of the incident, how did the accident happen?

Was the iPad in its case? **Yes** **No**

Please do not invalidate our insurance by removing the case or tempered glass screen, even if broken.

Names of any witnesses: _____

If theft, what is the Police Incident Number? _____

Declaration

I declare that this is a true account of what happened.

Signature of Parent: _____ Date: _____