TECHNOLOGY INFORMATION FORM

TEMPORARY FULL-DAY PROCTORING PROGRAM

Today's Date:							
Child's Name:							
Child's Cell Phone (if applicable):							
Parent/Guardian Name(s):							
Cell Phone(s):							
Work Phone(s):							
E-Mail Address(es):							
L-Mail Address(es).							
SCHOOL AND COURSE INFORMATION							
Child's School District and School Name:							
Child's Grade:							
What are the official days and hours of the school?							
At what time(s) is your child expected to participate in synchronous instruction?							
Please complete the Technology Information section for each device the student will use and connect to the CMU-GUEST wireless network.							
TECHNOLOGY INFORMATION – PRIMARY DEVICE							
Provide the following information for the device the student will primarily use for their school work.							
Did the school or district provide the device? Yes No							
What type of device will your child be using?							
Laptop Chromebook Tablet Smartphone Other (please specify)							
What is the brand of the device? (e.g. Apple, Dell, Samsung, etc.)							
What is the model? (e.g. iPad 4, XPS, etc.)							

	What is the MAC Address? (See https://www.cmu.edu/computing/services/endpoint/network-								
access/w	access/wireless/how-to/mac-address.html for help finding this.)								
What is the version of the Operating System?									
What vide	eoconferencing tool will	Lyour child need to us	se? Please che	ck all that apply					
WHAT VIGE	30Conteleticing 100i wiii	. your crilla need to us	e Fieuse Che	ck dii iridi appiy					
Zoom	Microsoft Teams	Google Meet	Skype	Slack	Other (specify)				
Please list	all applications that vo	ur child will need to u	se during the n	roctorina sessions	ç·				
Please list all applications that your child will need to use during the proctoring sessions:									
		_			_				
TECHNOLOGY INFORMATION – DEVICE 2									
Provide the following information for a second device that the student will use during the session (e.g. smart									
phonel.									

TECHNOLO	GY INFORMATION - DE	VICE 2			
Provide the phone).	e following information	for a second device	that the student w	ill use during	the session (e.g. smart
Did the sch	nool or district provide t	his device? Yes	No		
type of de	vice will your child be u	using? Please check			
Laptop	Chromebook	Tablet	Smartphone	Ot	ther (please specify)
-					
What is the	e brand of the device?	(e.g. Apple, Dell, San	nsung, etc.)		
What is the	e model? (e.g. iPad 4, X	PS, etc.)			
	e MAC Address? (See <u>h</u> reless/how-to/mac-add			es/endpoint	/network-
What is the	e version of the Operati	ng System?			
	ce will be used for video eck all that apply	oconferencing, what	tools will they use	on this devic	eŝ
Zoom	Microsoft Teams	Google Meet	Skype	Slack	Other (specify)

Please list all applications on this device that your child will need to use during the proctoring sessions:

Parents/guardians are primarily responsible for the support of their child's technology. Due to school and district policies and health protocols, proctors are only able to provide basic support and coordinate general network questions. Parents/guardians will need to be prepared to work with technical support from the school if necessary as most districts will not work with individuals other than the parent/guardian.

After submitting you registration, you will receive instructions and a code to access the CMU-GUEST Wireless Network.