

Electronic Device Survey

Windsor Bergen Academy

Please complete the following survey and send back to school with your child. Thank you for your cooperation.

Name of Student

Name of Parent/Guardian

Do you have access to Wi-Fi (Internet) in your home?

Yes

No

Does your child have a laptop, tablet, or other electronic device available to use to complete assignments?

Yes

No

Please provide the below information in the event we need to get in contact with you.

Email address _____

Phone number _____