

Technology Equipment Loan

	Due Date:	Due Date:		
Employee Name:	Email:	Email:		
Department:	Phone:	Phone:		
Equipment Type (note number of devices and serial numbers)				
Windows Laptop	Apple Mac	book		
iPad	Response	Card Clickers		
Portable Data projectors	Mobile Bro	adband Hotspot		
Digital Camcorders	Cellular Te	lephone		
Paguest Datails				
Request Details Please note the instructional or business need:				
Loan Guidelines				
Borrower: Please read these guidelines and sign below to acknowledge.				
• I agree to return equipment to the IT Help Desk by 4:00 pm on the due date.				
• I agree to install only licensed software on the loaned equipment and will consult with Help Desk staff if I have any				
		consult with Help Desk staff if I have any		
special software requirements.		consult with Help Desk staff if I have any		
special software requirements.	or programs that I may store of	on the loaned equipment are deleted before		
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Loan Equipment Checklist

Help Desk Staff: Verify each item and initial for Check-Out and Check-In.

Item	Check-Out:	Check-In:
Completed Loan Form		
Equipment		
Equipment Battery		
Laptop Power Supply & Cable		
Equipment Powers on OK		
Verify Battery is Charged (laptop)		n/a
Power off Equipment	n/a	
Plug in for Recharging	n/a	
Other:		
Help Desk Staff Initials:		
Borrower's Initials:		