

IT Equipment Loan Policy and Request Form

BORROWERS ARE RESPONSIBLE FOR LOSS OR DAMAGE TO EQUIPMENT

EQUIPMENT THAT IS NOT PICKED UP WITHIN THE ONE HOUR OF THE BOOKED TIME MAY BE LOANED TO OTHERS.

A MINIMUM OF 2 DAY ADVANCE NOTICE IS REQUESTED TO ENSURE EQUIPMENT AVAILABILITY.

1. IT Equipment may be borrowed:	
Ву:	
For the use of:	
For the period of:	
NOTE, DODDOWING TIMES MAY DE SHODTENED AT ANY TIME IN CASE OF	

[NOTE: BORROWING TIMES MAY BE SHORTENED AT ANY TIME IN CASE OF SIGNIFICANT DEMAND]

- 2. To borrow IT equipment, proper identification must be presented.
- 3. Privileges to borrow IT equipment may be revoked or suspended due to the following:
 - Repeatedly returning equipment late.
 - Returning equipment that is damaged or otherwise not complete or in good condition.
 - Repeatedly not picking up booked equipment.
- 4. For a full list of IT equipment available for borrowing, please contact Cheryl Rice or visit http://it.mcsd.org.
- 5. To book required IT equipment, visit http://it.mcsd.org, use the online form located under "IT Equipment Loan Policy and Request Form", or send an e-mail to Cheryl Rice.
- 6. If any assistance is needed for setting up or using the borrowed IT equipment, please contact IT Department Help Desk, ext. 7900.
- 7. The following form should be completed by the IT department and the borrower prior to any equipment being removed from the IT department.



IT Equipment Loan Form Name: Department: Phone Number: _____ E-mail Address:___ Department Head: _____ Equipment Information: Reason equipment is being borrowed: Location where borrowed equipment will be used: Terms of Loan: The equipment indicated above is the property of <insert organization name> and is to be used only for the purposes indicated in the borrowing policy. Period of loan: From _____ To ____ Restrictions of use: ☐ I have read and understand the equipment borrowing policy detailed above. ☐ I understand that I am responsible for damage or loss of the above equipment while it is in my care, custody, and control. Signature of borrower: Date: ____ Date:__ Authorized by: ___ IT Department Representative **Complete upon return of loaned equipment:** (print name), acknowledge receipt and inspection of the equipment listed above. Remarks: Signed: Date: