SSW Computer Equipment Request Form

Name of Requestor: _____ **Today's Date:** _____

Date of Request is From*: _____ **Until:** _____ **At (Time):** _____

Computer Support Office reserves the right to recall requested equipment at any time.* **Location: _____

Requested Equipment *(Check the appropriate box):* **Contact # (Optional):** _____

☐ **Laptop** ☐ **Overhead Projector**

☐ **Data Projector** ☐ **Other (list)** _____

Equipment will be used for: _____

Setup Help *(Check the appropriate box)*: ☐ **NO** ☐ **YES** **Setup Time:** _____

Special Instructions: _____

****Responsibilities of Requestor:** ***Please read and sign where indicated.*** ******

The requestor or requestor's instrutor/supervisor (when applicable) shall be responsible for requested equipment and all of its contents. The equipment shall be returned by the specified time (unless otherwise arranged) and in acceptable condition determined by the Tech Support Office. Equipment not returned; returned in unacceptable condition; and/or late, may result in, but is not limited to: possible suspension of borrowing privileges of School of Social Work computer equipment and/or possible costs penalties. *The Tech Support Office reserves the right to deny any requests.*

Requestor Signature: _____

Students are required to have their instructor's or supervising faculty's signiture. Equipment will not be released unless there is a signature. Same responsibilities above apply to the instructors/supervisors who grant permission for the student.

Faculty Signature (For Students Only) _____

Official Use Only

Released by (Initial): _____ **Date:** _____

Checked in by (Initial): _____ **Date:** _____

Acceptable Condition *(Check the appropriate box):* ☐ **YES** ☐ **NO**

Problem/Comment(s): _____

Equipment (SN Code):						
Laptop (L), data projector (p)	Circle SN Code					
video camcorder (cc)	109			T2400L	CompaqL	C600L
digital camera (DC)	A4000V	3M2000V	VHSCC	DiGCC	OlyDC	SnyDC
overhead projector (v)	11NBP 28NBP					
109 = Sharp and computer						