WESTERN CONNECTICUT STATE UNIVERSITY

EQUIPMENT OUT:				
DATE:				
Todays Date				
NAME.		IO ALITHODITED TO REMOVE EDOM		
Person borrowing equipment		IS AUTHORIZED TO REMOVE FRO	Building & office number of borrower	
THE FOLLOWING EQUIPMENT	:			
WCSU BARCODE	SERIAL NO.	DESCRIPTION/CONDITION	Equipment Cost (Filled in by Property Management)	
_				
THE EQUIPMENT WILL BE USED FOR			Ex. Research, Academics, Administration	
WHICH IS RELATIVE TO WORK BEING DONE IN THE			DEPARTMENT	
	Depa	artment borrower works in		
AT W	ESTERN CONNECTICUT STATE UN	NIVERSITY, 181 WHITE STREET, DA	NBURY. CT 06810	
		,,		
THE EQUIPMENT WILL BE LOC	CATED AT			
THE EQUI MENT WILL BE LOC	Home address of person taking	equipment COMPLETE HOME A	DDRESS	
FDOM		HATH MAYIMUM ONE VEA	D FROM DATE OF LOAN, at which time a way favor must	
PROM Date that loan is b	being made		R FROM DATE OF LOAN- at which time a new form must ent returned to loaner	
AT WHICH TIME THE ABOVE E	QUIPMENT WILL BE RETURNED TO ISSUI	NG DEPARTMENT		
THE ABOVE NAMED INDIVIDUA	AL WILL BE RESPONSIBLE FOR LOSS DU	E TO THEFT OR OTHER CAUSE AND ANY I	DAMAGE AND	
		EQUIPMENT UNTIL THE EQUIPMENT IS R		
		RT MUST ACCOMPANY THE NOTIFICATION PIENT WILL BEAR RESPONSIBILITY FOR T		
		HIS EQUIPMENT CAN BE RECALLED AT A		
APPROVED DIRECTOR OR DEPARTMENT HEAD SIGNATURE		BORROWER SIGNATURE - I have r	ead and agree to the terms of the loan stated above	
APPROVED DIRECTOR OR DEPARTMENT HEAD PRINTED NAME		BORROWER PRINTED NAME	BORROWER PRINTED NAME	
	BEL	OW FOR EQUIPMENT BEING RETURNED		
EQUIPMENT RETUR	NED:			
DATE:	THE	ABOVE EQUIPMENT HAS BEEN RETURNE	D TO	
Date equipmen				
Building and roo	om number equipment returned to	IN THE	SAME CONDITION AS	
· ·	ME OF THE LOAN, WHERE REASONABLY	EXPECTED.		
PLEASE NOTE ANY EXCEPTION	nns.			
FLEASE NOTE ANT EXCEPTIO	ino.			
STAFF SIGNATURE(accepting	return of equipment)	BORROWER SIGNATURE		
Staff member accepting return		1		
THIS ORIGINAL FORM M	UST BE RETURNED TO THE PROP	ERTY MANAGEMENT DEPARTMEN	T. OM-014	