



Equipment Checkout and Responsibility Agreement

Governed by
INFORMATION TECHNOLOGY SERVICES



This form may be found online at <http://www.umflint.edu/its/services/forms/equipment.pdf>

Instructions: This form was designed for faculty and staff who may require camera equipment, a laptop and/or projector for use outside the facilities of the UM-Flint campus. Please reserve equipment two (2) business days in advance by submitting the Mediated Classroom Services (MCS) equipment order form online at <http://www2.umflint.edu/its/mcs/order/>. Then complete the information below and bring this form to the ITS office located at 207 MSB to pick up your equipment.

All specified equipment is the property of the University of Michigan-Flint and is set up with standard software needed for use.

Equipment Issued: (ITS staff will fill in Model and Serial/Service Tag #)	
<input type="checkbox"/> Laptop Computer Model: _____ Serial/Service Tag #: _____ <input type="checkbox"/> Laptop Bag <input type="checkbox"/> Mouse <input type="checkbox"/> Other _____	
<input type="checkbox"/> Projector for Laptops Model: _____ Serial/Service Tag #: _____ <input type="checkbox"/> Projector Bag <input type="checkbox"/> Other _____	
<input type="checkbox"/> Camcorder Model: _____ Serial/Service Tag #: _____ <input type="checkbox"/> Camcorder Bag <input type="checkbox"/> Tripod <input type="checkbox"/> Other _____	
<input type="checkbox"/> Digital Camera Model: _____ Serial/Service Tag #: _____ <input type="checkbox"/> Camera Bag <input type="checkbox"/> Tripod <input type="checkbox"/> Other _____	
<input type="checkbox"/> Other Equipment: _____ Serial/Service Tag #: _____	
Borrower's Information:	
MCS Equipment Order Number:	Pickup Date:
Borrower's Name (printed):	
Department:	
Campus Phone:	Expected Return Date:
<i>I hereby request authorization to remove and use the equipment as specified above. I agree that the equipment is my full responsibility until returned, and that I will provide reasonable care and security, and return it by the stated date.</i>	
Borrower's Signature:	Date:
<i>In accordance with University policy, faculty and staff members must receive authorization to remove University equipment from University buildings. This authorization must be received from the department head, dean, or chair that is of higher administrative authority than the requester. This authorizes the responsibility, removal and use of the equipment as specified above. Any replacement costs resulting from damage or loss incurred during this period will be billed to borrower's department.</i>	
Authorizing Name (printed): <small>Department Head, Dean, or Chair</small>	
This request hereby approved in accordance with Standard Practice Guide #518.2	
Authorizing Signature:	Date:
ITS OFFICE USE ONLY	
Checked OUT by: _____	Date/Time: _____
Checked IN by: _____	Date/Time: _____

If you should require technical assistance with this equipment, please call MCS at (810) 237-6628.