

Equipment Loan Approval Form

Requested by:

ALL FIELDS ARE REQUIRED

Department: _____

Requester's Cell/OfficePhone #: _____

Requester's Name: _____

Title: _____

Are you currently in possession of the device
being loaned? Y N

If yes, indicate the following:

Reason for the Request: Please indicate how this loan is job related

BCC Tag Number

Serial/Service Tag Number

Signature: _____

Date: _____

Requested for:

Name: _____

BCC ID#: _____

Home Address: _____

Home & Campus Phone #: _____

City, State, Zip Code: _____

Department, Bldg. and Room: _____

Are you in possession of a BCC issued mobile device? Y N

If yes, indicate the following:

Please read and acknowledge

BCC Tag Number

Serial/Service Tag Number

Responsibilities for participation in this program:

1. Employees are responsible for the proper care and use of the laptop loaned to them. Laptops loaned to faculty and staff must only be used to conduct college business.
2. Employees are responsible for the loss of the laptop, as well as any damages unrelated to normal wear and tear, including replacement costs at fair market value.
3. If equipment is stolen, the employee must notify the authorities in whose jurisdiction the theft occurred and the College's Public Safety Department.
4. Employees must operate the equipment in accordance with the University's computer user responsibility policy.
5. In accordance with University policy, a physical inventory of the equipment will be performed on an annual basis by Property Management. The College reserves the right to conduct one or more inventories of the laptop annually. If an inventory is requested while the laptop has been issued to an employee, the employee will be notified and will be responsible for bringing the laptop to campus so an audit may be performed. Failure to comply will result in the College taking actions to bar the employee from borrowing any equipment owned by the College.
6. Equipment must be returned in good working condition with no damage beyond normal wear and tear.
7. Employees are responsible for returning the laptop to the Property Management Office upon termination any other change in employment with the College.

☐ Please check the box to indicate you have read, understood, and agree to abide by the responsibilities of the program.

Employee Signature: _____

Date: _____

President/VP of Administrative Affairs/Business Manager Signature: _____

Date: _____

☐ Approved

☐ Not approved