

**EQUIPMENT LOAN TO EMPLOYEES AND STUDENTS**  
**Authorization for Temporary Off-Campus Use**  
**of University Equipment**

Loaning department \_\_\_\_\_ Chart/Organization code \_\_\_\_\_

Borrower name \_\_\_\_\_

Department \_\_\_\_\_

Campus address \_\_\_\_\_

Campus phone \_\_\_\_\_

Home address \_\_\_\_\_

Home phone \_\_\_\_\_

<u>Check one:</u>	
Faculty	_____
Staff	_____
Student	_____

Off-campus location/address of loaned equipment \_\_\_\_\_

Loan term (may not be greater than one year): From \_\_\_\_\_ to \_\_\_\_\_

(Loaning department may request return of equipment before the end of loan term if needed.)

Purpose of loan

\_\_\_\_\_

\_\_\_\_\_

Special conditions

\_\_\_\_\_

\_\_\_\_\_

Equipment data

Description	Property control (Ptag) number	Serial number
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Signatures:

\_\_\_\_\_  
Borrower\*\*

\_\_\_\_\_  
Approval Loaning unit (see instructions)

\*\*I accept responsibility for reasonable care and security of all University property that is in my custody off campus in pursuit of my official duties. Liability assessment, if any, will be based on "Section 12.1 – Custodianship of Property" in *Business and Financial Policies and Procedures*.

\_\_\_\_\_  
Date returned

\_\_\_\_\_  
Received by

\_\_\_\_\_  
Phone #

This form may be photocopied.