

Use of District Equipment Employee Sign-Out Sheet

Item Description: _____

Serial #: _____ Inventory Tag #: _____

Staff Member Name: _____
(Please print)

Department/School: _____

Telephone Extension: _____

Home Address: _____

City: _____ State: CT Zip: _____

Phone Numbers: () _____ () _____
Home Cell

I understand in borrowing the item(s) above, I will be responsible for the replacement cost if it is not returned. Also, if the item is in poor condition beyond normal wear and tear upon return, I am responsible for any and all repair costs or replacement.

Signature of Staff Member: _____

Date: _____

~Office Use Only~

Approved for loan by: _____
(Signature)

(Name and Title/Please print)

Date: _____

Item(s) are to be returned on or before: _____

Item(s) received back
and in proper condition by: _____
(Signature)

(Name and Title/Please print)

on: _____
(Date)