

STUDENT LAPTOP LENDING REQUEST FORM

Laptops are available on a temporary basis only. Laptops will be checked out for a 2-week period only. To ensure equitable distribution of limited resources, no exceptions will be made to this policy.

All fields are required.

Instructor Name: _____ Course : _____

Reason for Requesting Laptop: _____

Student First Name: _____ Student Last Name: _____

Student ID: _____ Contact Phone Number: _____

Personal Email Address: _____

Due Date for Return: _____

Instructor Signature: _____ **Date:** _____

***Student Signature:** _____ **Date:** _____

*By signing above student agrees to the following conditions:

Hodges University will not be held responsible for any loss, monetary or otherwise, associated with the use of a loaner laptop. Student assumes full responsibility for any damage, loss or theft of the laptop. Unreturned laptops may be reported as stolen to the appropriate authority if not timely returned. In addition, a student's University account may be charged the replacement value up to \$1000 for any unreturned laptop and/or accessory item related to the laptop (e.g. cable, charger or carrying case) . Hodges University reserves the right to end this program at its discretion.

For Lab Use Only

Checked out by: _____ Date: _____

Service tag #: _____ Logged on team site:

Returned Date: _____ Received by: _____

Notification Date: _____ Locked Date: _____

Reported Date: _____ Case# _____

Condition: Acceptable Unacceptable — *please note specifics in comments*

Comments (*please note conclusion of police reports and update inventory*):