

## ME416 Design Project: Request to Check Out Items to Work Off-Campus

Project Name and Sponsor: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Primary Contact E-Mail: \_\_\_\_\_

Primary Contact Phone #: \_\_\_\_\_

Project Scope:

Work to be completed off-campus:

Location where work will be completed (physical address): \_\_\_\_\_

Date item(s) will be returned to WSU Pullman: \_\_\_\_\_

Expected condition of item(s) returned: .

By signing this form, I agree to use the items checked out for the sole purpose of completing the ME416 design project as outlined above. Due to COVID-19 restrictions, our project is unable to be completed in the lab and is approved to be completed at an off-campus location. I understand that all items taken from campus are the property of WSU and need to be returned to WSU once the project is complete.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

As the faculty member in charge, I approve the above mentioned group to check out items for the completion of their ME416 project. I understand that I am responsible for the items being checked out and will work with the group to ensure all items are returned at the agreed upon date. I will also provide any necessary safety guidance for proper use of any tools.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[illegible]