



The equipment listed below is the property of Indiana University-School of Education at IUPUI and is being loaned for the time period and to the person indicated below

Faculty\Staff Members Name:	Shawn Nisar		
Email Address:	shawn.nisar@gmail.com		
Purpose:	Faculty use for meeting		
Category:	Desktop	Manufacturer:	Dell
		Model:	Optiplex 5040
Extra Item(s):	None		
Other Item:	kjdbkjd		
Service Tag:	hgcvds		
Loan Date:	2019-11-12		
Return Date:	2019-11-14		
Time:	9am		

I understand that the following conditions will apply to all equipment:

- It will only be used by me for school related activity;
- I assume liability for damage or theft and will be responsible for the repair or replacement costs of each item (I will consult my personal homeowners or auto insurance coverage policies);
- I will not store any confidential or sensitive information as defined by the IU Security Office policy on the equipment, <http://protect.iu.edu/cybersecurity/data> ;
- I will report the loss or theft of the equipment immediately to Education Technology Services;
- I will execute reasonable care in its transport and use;
- I will return the equipment on the agreed Return Date/Time indicated above OR immediately prior to terminating employment with IU School of Education at IUPUI OR upon the request of Education Technology Services;

Faculty\Staff Member Signature: _____ Date: ____/____/____

APPROVAL: _____ Date: ____/____/____
(Education Technology Services Staff Signature)

The item(s) have been returned and inspected for damages. Damages are noted as follows:

Signature of ETS Staff Checking in: _____ Date: ____/____/____