


Name:

Phone:

Email:

Purpose:  

## Equipment:

     Serial:

Rental Date:

Return Date:

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

- a. It will only be used by me for school related activity;*
- b. 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);*
- c. 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> ;*
- d. I will report the loss or theft of the equipment immediately to Education Technology Services;*
- e. I will exercise reasonable care in its transport and use;*
- f. 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.*

Rentee Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPROVAL: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_