

ASSET RENTAL**FORM: 9**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: ____/____/____