Name: Jackson, Tambra Phone: Email: Purpose: Faculty Use for Class Equipment:
Desktop
Rental Date: 12/12/2019 Return Date: mm/dd/yyyy
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:/