11/12/2019 Rental Page

RENTAL FORM	
Name:	
Phone:	
Email:	
Purpose: Faculty Use for Class ▼	
Equipment:  Desktop ▼ Dell ▼ 5040 ▼ Serial: 2HFGMD2	
Rental Date: mm/dd/yyyy  Return Date: mm/dd/yyyy	
I understand that the following conditions will apply to all eda. It will only be used by me for school related activity; b. I assume liability for damage or theft and will be responsive replacement costs of each item (I will consult my personal had insurance coverage policies); c. I will not store any confidential or sensitive information as Office policy on the equipment, http://protect.iu.edu/cybersed. I will report the loss or theft of the equipment immediatel Services; e. I will exercise reasonable care in its transport and use; f. I will return the equipment on the agreed Return Date/Time immediately prior to terminating employment with IU School upon the request of Education Technology Services.	ible for the repair or nomeowners or auto is defined by the IU Security ecurity/data; ly to Education Technology
Rentee Signature:	
APPROVAL:	Date:/