Name: Carr, Kari	
Phone:	
Email:	
Purpose: Faculty Use for Class	
Equipment:	
Desktop Dell Serial: 685RPD2	
Rental Date: 11/07/2019	
Return Date: 11/14/2019	
I understand that the following conditions will apply to all ed	quipment:
a. It will only be used by me for school related activity;	
b. I assume liability for damage or theft and will be responsi	
replacement costs of each item (I will consult my personal h insurance coverage policies);	omeowners or duto
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/cyberse	· ·
d. I will report the loss or theft of the equipment immediately	•
Services;	
e. I will exercise reasonable care in its transport and use;	
f. I will return the equipment on the agreed Return Date/Tim	ne indicated above OR
immediately prior to terminating employment with IU School	ol of Education at IUPUI OF
upon the request of Education Technology Services.	
Rentee Signature:	Date:/
APPROVAL:	
APPROVAL:	Date:/

View Rentals