
SOUTHSIDE VIRGINIA COMMUNITY COLLEGE

Equipment Check Out Record	
NAME:	
DATE:	
HOME TELEPHONE NUMBER:	
OFFICE TELEPHONE NUMBER:	
ITEM DESCRIPTION:	
INVENTORY ID:	
SERIAL NUMBER:	
ITEM DESCRIPTION:	
INVENTORY ID:	
SERIAL NUMBER:	
ITEM DESCRIPTION:	
INVENTORY ID:	
SERIAL NUMBER:	
<p>I hereby accept custody of the above equipment belonging to Southside VA Community College for official off-campus use. Should the equipment be lost or damaged through negligence on my part, I assume full responsibility for such equipment and I shall make payment to the College at the price shown on the Equipment Inventory Record. I understand the College may require return of the equipment at any time.</p> <p>In the event that the custody of the above equipment is to be for an extended length of time, this form must be updated every six months, on February 1 and again on September 1. <i>I hereby acknowledge that it is my responsibility to update this form and re-submit to the Fixed Assets Control Officer as required.</i> The Fixed Assets Control Officer will provide check-out forms semi-annually prior to the resubmission dates.</p> <p style="text-align: center;"><u>Guidelines for Employee Equipment Check Out</u></p> <ol style="list-style-type: none"> 1. Only the college employee listed as the Temporary Custodian may use the computer and associated hardware/software. 2. No software is to be loaded by the Temporary Custodian. 3. No games are to be loaded by the Temporary Custodian. 4. If a problem occurs, all troubleshooting and repair to the PC is to be done by the College. 5. All troubleshooting and repair work, will be done at the College. 	
DATE OF ANTICIPATED EQUIPMENT RETURN:	
<i>Note: Equipment must be returned immediately if requested by the College.</i>	
Signature of Temporary Custodian:	
Date of Equipment Check Out:	
Signature of Temporary Custodian:	
Date of Equipment Return:	

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