

# EQUIPMENT USE AUTHORIZATION

For Student Checkout of Laptop, Projector, Camcorder, or PA System

This request is for the following course or project: \_\_\_\_\_

Authorization is for the following date(s): \_\_\_\_\_

## The following student(s) are authorized to check out equipment:

_____	_____
Name	Name
_____	_____
Name	Name
_____	
Name	Use back of form for additional names →

## IMPORTANT

Please Read Carefully

Please ask the authorizing faculty to **call the MDS location where you will be reserving your equipment** (Building 2 or 10) to verbally authorize your order immediately after signing this form.

**Building 02 (Education) 756-7198**  
**Building 10 (Agriculture) 756-6765**

\_\_\_\_\_ Laptop Computer

\_\_\_\_\_ Camcorder

\_\_\_\_\_ PA System

\_\_\_\_\_ Digital Projector \*

\* not available over weekends

Media Distribution Services equipment may be borrowed for **course related/instructional use only**. All equipment used for personal or ASI club use is subject to rental rates. Your signature authorizes a student to use the equipment for specific course related work only.

**Faculty Signature:** \_\_\_\_\_ **Office Extension** \_\_\_\_\_

**Faculty Name:** (please print) \_\_\_\_\_

**A Phone Call is also required!**

### Office Use Only

MDS Verification: Date Called \_\_\_\_\_ Date Verified \_\_\_\_\_ Employee Initials \_\_\_\_\_

Faxed to Bldg 02 / Bldg 10 Date \_\_\_\_\_ Initials \_\_\_\_\_