



CALIFORNIA STATE UNIVERSITY, FULLERTON

Elementary and Bilingual Education EC-324

P.O. Box 6868, Fullerton, CA 92834-6868 / T 657-278-4731 / F 657-278-5133

Student Laptop check-out Form

Print form and complete section in **red** prior to picking up laptop.

USER NAME: _____

PHONE: _____ EMAIL: _____

CWID#: _____ BLOCK#: _____

EXPECTED GRAD DATE: _____ CHECK OUT DATE: _____ RETURN DATE: _____

BLOCK LEADER APPROVAL: _____

COMPUTER TYPE: _____ PROPERTY #: _____

USERNAME: _____ PASSWORD: _____

ITEMS CHECKED OUT:

ST initials

Staff initials

- | | | |
|--------------------|-------|-------|
| 1. Laptop computer | _____ | _____ |
| 2. Power adapter | _____ | _____ |
| 3. Charger | _____ | _____ |
| 4. Laptop bag | _____ | _____ |

I have received from the EDEL department, the above items that I agree to return to the department at the date stated above or whenever requested by the EDEL department. I understand that I am completely responsible for the equipment described above and **may not transfer the equipment to another person**. I must report any problem with the safekeeping of the equipment. I accept that I may be responsible for the replacement cost for any equipment I borrow and acknowledge that all items listed above remain the sole property of the EDEL department. In addition, credentials/degrees will not be posted until the equipment is returned. *I am responsible to remove all personal files before returning the equipment.*

Signature: _____ Date: _____

ITEMS RETURNED:

ST initials

EDEL staff initials

- | | | |
|--------------------|-------|-------|
| 1. Laptop computer | _____ | _____ |
| 2. Power adapter | _____ | _____ |
| 3. Charger | _____ | _____ |
| 4. Laptop bag | _____ | _____ |

User's Signature: _____

Equipment received from: _____ Date: _____

Contact ext. 4731 with general questions on equipment sign out and return, and also any technical problems with the equipment.