

School _____

Name of Borrower _____

Contact Info:

Phone# _____ Email _____

Date Needed _____ Expected Return Date _____

Reason for Need _____

All laptops are owned by the Crook County School District and subject to their policies, rules and regulations. By signing, the user vows to take all reasonable precautions with the computer and to make every effort to return it in the same condition as checked out. Laptops are for the use of the undersigned only. If an accident does occur, the undersigned will contact the Crook County Technology Department as soon as possible.

(Please Sign) _____

Signature of Administrator _____

Technology Use Only

Laptop Asset Tag _____ Date Checked Out _____

Check-In Process

Date Checked Back In _____ Checked in by (tech) _____

Signature of Borrower _____

Verify Asset Tag _____

(Technician needs to verify correct asset was returned.)

Asset Tag is correct

Asset Tag is missing

Other: _____