



Science Department – Equipment Loan Form

Equipment Pickup Date: _____ Anticipated Equipment Return Date: _____

College: _____ Department: _____

By signing below, my department will be financially responsible for any loss or damage to the listed Science department equipment. Failure to return equipment by anticipated return date will be considered a loss.

Borrower Signature

Chairperson Signature

Dept. Budget #: _____

Itemized list of equipment (see attached pictures of equipment condition at time of loan):

Equipment	Estimated Cost

I acknowledge that the above equipment was picked up in good working order as shown in the attached pictures.

Science Personnel Signature

Date

I acknowledge that the above equipment was received in good working order as shown in the attached pictures.

Person Picking Up Equipment Signature

Date

Describe any damages to returned equipment with estimated repair or replacement costs:

Person Returning Equipment Signature

Date

Science Personnel Signature

Date