

## **Extended Off-Campus/Adjunct Computer Request Form**

Name of Applicant:	Tech ID:	
Phone Number:	1 ech 1D:	
Location where equipment will be used:		
Purpose/N <u>eed:</u>		
Computer Information	on: Make Model Serial Number(s) State Asset Tag #	
	ne Return: Each semester, the adjunct mu nd this form must be initialed by Campus	ust return the equipment for
Fall Spring Summer	*Upon semester return, examination and cleaning of computer will be done. Equipment can be re-imaged if the technician deems it necessary. Do not save your documents and files to the computer if you need them.	*No software or hardware will be installed or used on this property without proper authorization by the campus technician. Software and hardware unless otherwise noted will be installed by the campus technician.
	*Once the adjunct's teaching term is completed, the equipment should be turned in to the campus tech within 10 days of the end of the semester.	*Please note that any violation of college
		computer use policies will result in the computer immediately being returned to the college.
-	y of the Agency/Organization/Individual	to return all equipment used in good
condition at the end of assignment.		

Applicant's Signature

Approved By

Date

Date