

Borrower Information:

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Unikey: \_\_\_\_\_

Academic Information:

Unit Coordinator/Academic in Charge:

\_\_\_\_\_

Name of the unit equipment is supporting: \_\_\_\_\_

Email of Academic: \_\_\_\_\_

Phone Number of Academic: \_\_\_\_\_

Project Details:

Project Name: \_\_\_\_\_

Equipment Borrowed:

| Item Description | Quantity | Serial Number |
|------------------|----------|---------------|
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Borrowing Dates:

Date Borrowed: \_\_\_\_\_

Date to be Returned: \_\_\_\_\_

Authorization:

Name of Person Authorizing : \_\_\_\_\_

Signature of Authorizing Person: \_\_\_\_\_

Terms and Conditions:

The borrower is responsible for the care and safe return of the borrowed equipment.

Any damage or loss of equipment must be reported immediately to the Media Lab.

Equipment must be returned by the agreed-upon return date unless an extension is granted.

Borrower Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For Media Lab Use Only:

Equipment Returned on: \_\_\_\_\_

Condition of Equipment: \_\_\_\_\_

This form should be filled out and signed by both the borrower and the authorizing person from the Media Lab.