

# FSCJ Equipment Usage Acknowledgement & Agreement

Equipment Description \_\_\_\_\_

Model Number (s) \_\_\_\_\_ Serial # \_\_\_\_\_

BarCode Number (if any) \_\_\_\_\_

Term/Course/Instructor \_\_\_\_\_

Campus/Room Number \_\_\_\_\_

I hereby acknowledge that I have received the above equipment for use in the classroom specified. I understand that this equipment is college property and is provided as an accommodation to benefit my learning experience while attending FSCJ – Florida State College at Jacksonville.

I also understand that this equipment is being “checked out” to me during this term, that it must be returned to the Student Support Services Office **at the end of the term**, and that it is my responsibility to return it.

By my signature below, I agree to exercise proper caution in operating, carrying, or storing the equipment, including securing it safely when not in use. I also agree to notify the Student Support Coordinator on Campus or the Student Support Services Office immediately of any damage to, or malfunction of said equipment.

Student Signature	Date	Witness (Issuer of Equipment)	Date
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Print Name of Student	Print Name of Witness/Issuer
Student Number _____	To be Returned by (Date): _____

Date Returned: _____	Student Support Services Office
Received By: _____	Florida State College at Jacksonville
Condition: _____	South   Downtown   North Kent   DWC