



OXNARD SCHOOL DISTRICT

1051 SOUTH "A" STREET • Oxnard, CALIFORNIA 93030 • 805-487-3918

EQUIPMENT CHECKOUT FORM

Print Your Name: _____

I have been issued the following Oxnard School District equipment:

Item Description	Make/Model	Mfg. Serial #	OSD Tag #

When the equipment listed above is taken off-site I assume responsibility for its safe return and shall be fully liable for any loss or damage. I will pay the cost of repairs or replacement.

Please initial each box to verify agreement:

- I have read and understand the OSD Employee Technology Acceptable Use Policy (BP 9886).
- I will take all necessary precautions to make sure that this equipment is kept safe from harm and/or theft and I will keep it locked up and secure when off campus.
- I acknowledge that this equipment is only to be used by me for work-related projects. It will not be used by non-OSD employees.
- I will not load any non-OSD approved software onto the system. I am aware that home technical support is not available for this system while it is loaned out. If a problem arises, I will immediately return the equipment to the site and have an OSD technology helpdesk repair ticket issued.
- I understand that when this equipment is taken off-site, I am responsible for its safe return and shall be fully liable for any loss or damage (BP 4441).

School/Grade/Department

Employee Signature

Administrator Signature

Checked out by/Date

Good Fair Damaged

Checked in by/Date/Administrator's Initials

Condition When Returned (Circle One)
(Please list repairs needed on back)