

**TUCSON UNIFIED SCHOOL DISTRICT
USE OF DISTRICT EQUIPMENT AND COMPUTER-RELATED ITEMS
REQUEST FORM**

NOTE: TUSD Governing Board Policy EDC prohibits personal use of TUSD equipment. Only requests which relate to staff development or to a particular and specific school-related project will be considered.

Employee Name _____

Department/School _____

Item(s) _____
(Be sure to list all components)

Expected Dates of Use _____

Reason for Request (Include as much detail as possible):
Attach additional sheet if necessary.

Evidence of Insurance: Company _____ Policy No. _____

The Staff Member requesting the use of District equipment, if approved, hereby agrees to return such equipment promptly in working condition. Loss or damage to equipment will be responsibility of the employee. Replacement or repair costs may be deducted from my salary if deemed necessary by the District.

Signature _____ Date _____

(Please circle)

Employee

Approved Disapproved Signature _____ Date _____

Principal

Approved Disapproved Signature _____ Date _____

Regional Assistant Superintendent

Approved Disapproved Signature _____ Date _____

Assistant Superintendent for General Services

After signatures are complete or request has been disapproved, please send this form to the Principal involved.

(Checkout form is on EDC-E3.)