



ASSOCIATED STUDENTS, INCORPORATED * CALIFORNIA STATE UNIVERSITY, LOS ANGELES

INTERNAL EQUIPMENT LOAN RESERVATION & PROPERTY MOVEMENT FORM

This Request form is empowered and governed in part by A.S.I. Equipment Policy 215 and Asset Management Policy 205:

- A.S.I. does not permit loans of A.S.I. equipment to individuals for non-A.S.I. uses. The Executive Director shall have the final decision as to the appropriateness and condition for an equipment loan.
- Failure to return A.S.I. equipment on time may result in suspension of future equipment loans. The Executive Director shall have the final decision on the duration of time.
- Each request can be for at two day period. More than two consecutive checkouts will be at the discretion of the Executive Director.
- Each request must be submitted **no later than one business day prior** to your intended reservation date.

A.S.I. Member Name: _____ Date of Request: _____

Phone number: _____ - _____ - _____ Email: _____

Street Address: _____ City & Zip Code: _____ / _____

Is this a department collaboration?: YES NO Department Name: _____ Phone: _____ - _____ - _____

Event & location where the equipment will be used: _____ Date: _____

Requested Equipment:

Pick up Date: _____	Pick up Time: _____ : _____ am/pm	Return Date: _____	Return Time: _____ : _____ am/pm
<input type="checkbox"/> <u>Nikon Camera Kit - 1 day max</u> AC Adaptor & Battery, Camera bag, SanDisk SDHC Card GB	<input type="checkbox"/> <u>A.S.I. Projector Kit- 1 day max</u> Projector, Wall Charger, Connectivity Cords	<input type="checkbox"/> <u>Conference Phone Kit – same day</u> Voice Station 500, Wall Charger cords.	<input type="checkbox"/> <u>Canopy Kit- 1day max</u> Canopy Frame, Canopy Cover, Canopy Walls, Table Cover
<input type="checkbox"/> <u>A.S.I. Laptop Kit – 1 day max</u> Wall Charger, mouse, cords	<input type="checkbox"/> <u>A.S.I. Sound System Kit</u> Speakers, Microphone, Cords.	<input type="checkbox"/> <u>Tables: _____ qty</u>	<input type="checkbox"/> <u>Chairs: _____ qty</u>
<input type="checkbox"/> <u>Handheld Radios – 1 day max</u> Radio, Wall Charger _____ qty	<input type="checkbox"/> <u>Ice Coolers: _____ qty</u>	<input type="checkbox"/> <u>A.S.I. A-Frames: _____ qty</u>	<input type="checkbox"/> <u>A.S.I. Marketing Kit</u> Bin, Cart, Table Linen
<input type="checkbox"/> <u>Pizza Warmer: _____ qty</u>	<input type="checkbox"/> <u>Easel: _____ qty</u>		
<input type="checkbox"/> <u>Display Board</u>	<input type="checkbox"/> <u>A.S.I. Backdrop</u>		
<input type="checkbox"/> <u>Board Games: _____ qty</u>			

I, _____, understand via my signature below I take full responsibility for the equipment that will be checked out to me and I will assume responsibility for the market cost for the replacement of all items noted and associated with equipment that I am checking out if lost or damaged.

Requesters Signature: _____ Date: _____

For Official Use Only:

Request Status: Approved Not Approved

Director of Programs & Leadership Signature: _____ Date: _____

Office Manager Signature: _____ Date: _____

Executive Director Signature: _____ Date: _____





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INTERNAL EQUIPMENT LOAN RESERVATION & PROPERTY MOVEMENT FORM
Check Out/In Form

A.S.I. Member Name: _____

For Official Use Only:

CHECKOUT

Pick up Date: _____ Pick up Time: _____ : _____ am/pm [Requesters Int : _____ Date: _____] [Staff Int. _____ Date: _____]

Approved Equipment:

Equipment Check-Out Condition:

Equipment Check-In Condition:

Table with 3 columns: Approved Equipment, Equipment Check-Out Condition, and Equipment Check-In Condition. Rows include items like A.S.I. Nikon Camera Kit, A.S.I. Laptop Kit, Handheld Radio, Pizza Warmer, Display Board, Board Games, A.S.I. Projector Kit, A.S.I. Sound System Kit, Ice Cooler, Easel, A-Frame, A.S.I. Backdrop, Conference Phone Kit, A.S.I. Canopy Kit, Tables, Chairs, and A.S.I. Marketing Kit.

RETURN

Return Date: _____ Return Time: _____ : _____ am/pm [Requesters Int : _____ Date: _____] [Staff Int. _____ Date: _____]

Executive Director Signature: _____ Date: _____
Full-Time Staff Signature: _____ Date: _____