

**OFF-CAMPUS USE OF STATE PROPERTY**

It is in the best interest of the college that property is not removed from the campus unless it is necessary for the performance of college activities. The conditions under which the College property or materials may be used are listed below and are hereby a part of the agreement signed for on this form. This form must be completed and approvals obtained prior to property being taken off campus.

Check Out Date: \_\_\_\_\_

*(Check One)*

Indefinite Time Period

Short Term Check Out—Expected Return Date: \_\_\_\_\_

Item Description: \_\_\_\_\_

PU-Tag # \_\_\_\_\_

Item Description: \_\_\_\_\_

PU-Tag # \_\_\_\_\_

**LOCATION/SITE –Complete this section for all tagged property (used at an off campus site) including all tagged laptops/Tablets or other items regardless of location.**

Location Name: \_\_\_\_\_ Room Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**RESIDENCE SITE–Complete this section for property used at an off-campus residence.**

**EMPLOYEE AGREEMENT**

I, \_\_\_\_\_ hereby agree to the following as conditions of removal of UA-PTC property:  
*(Print or Type)*

- to use property only for college activities,
- to return property on due date or upon request,
- to report lost or stolen equipment as soon as it is noticed,
- to pay for property which is lost or stolen if not reported.

Phone: (    ) -                      Email \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Director’s or Dean’s Approval**

Having determined that the off-campus use of College property is necessary to perform college activities, I authorize the use of the property for the project stated above and assume responsibility for all property purchased with project funds. If employee is the Director/Dean, supervisor’s or Vice Chancellor’s signature is required.

Approved By: \_\_\_\_\_ Extension: \_\_\_\_\_  
*(Print or Type Name)*

Authorized By: \_\_\_\_\_ Date: \_\_\_\_\_  
*( Director/Dean)*

**Purchasing & Inventory**

Approved By: \_\_\_\_\_  
*(Print or Type Name)*

Authorized By: \_\_\_\_\_ Date: \_\_\_\_\_

**Equipment Return**

I certify that the above listed property was returned to the UA-PTC in satisfactory condition on \_\_\_\_\_  
*(Date)*

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
*(Director/Dean)*

**Distribution: Send completed form to Purchasing & Inventory or [inventory@uaptc.edu](mailto:inventory@uaptc.edu) and retain a copy for departmental records.**