



Completion of this form authorizes the SF State employee below to use the identified San Francisco State University property/equipment at off-campus locations for sole purpose of conducting University business. By signing this Authorization form, the employee agrees to the following:

- To assume complete responsibility for the custody of the equipment including its replacement if lost, stolen, or damaged as a result of the employee's negligence. The University Police Department must be contacted immediately for lost, stolen equipment – (415) 338-7200.
- A Property Lost / Stolen Form along with a Property Survey Form shall immediately be completed and sent to the University Property Office. Both forms can be found on the SFSU Fiscal Affairs web-site.
- Loaned IT equipment will only contain University approved software. Additionally, the University will not be held responsible for legal sanctions and claims against an employee who has loaded unlicensed software.
- Employee will keep a copy of this authorization within the vicinity of the equipment noted below whenever transporting the equipment as proof of permission to use the equipment off campus.
- The employee is not relieved of the responsibilities stated herein until this form is signed by an appropriate administrator acknowledging the return of the equipment. This form shall be maintained on file with the loaning department until completion of the first Physical Inventory following return of the equipment.

Name of Borrower \_\_\_\_\_ SFSU ID # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone \_\_\_\_\_

Line#	SFSU Property Tag #	Description	Serial Number	BLDG_Room	Cost	Returned
1						
2						
3						
4						
5						

**Purpose of Loan**  
 Instruction      Research      Demonstration      Other (describe)

**Period of Loan (Specific Dates)**      From: \_\_\_\_\_      Through: \_\_\_\_\_

\_\_\_\_\_  
 Print Name      Signature of Borrower      Date

\_\_\_\_\_  
 Department      Approved: Dept. Head/Chair\*      Date

<b>I acknowledge the return of the above item(s)</b>	_____ Signature of Appropriate Administrator	_____ Date
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\* If the Borrower is the Dept. Head/Chair, approval must be from an AVP, Associate Dean or Dean.