

**Equipment Loan Contract
Community College of Allegheny
County Supportive Services**

Date Checked Out: ____/____/____ Semester: _____

Due Date: ____/____/____

Serial Number: _____ Student ID #: _____

I, _____ (Print Name), have taken receipt of the following equipment as a loan from the Supportive Services Center for the following semester. It is with my full understanding that this equipment and packaging will be returned, in the same condition, at the end of the semester. *I also understand that it is my responsibility to pay for any damaged or destroyed equipment.* Failure to do this will result in a hold placed on my college account until the equipment is replaced. I will be responsible for the full cost of replacement.

Equipment Checked Out

Condition of Equipment: New Used

Student Name: (Print) _____ Phone Number: _____

Student Signature: _____

Authorized Supportive Services Signature: _____

Equipment Return

Date of Return: ____/____/____

Condition of Equipment:

Authorized Supportive Services Signature: _____