

**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.)