

CLARKSVILLE-MONTGOMERY COUNTY SCHOOL SYSTEM CENTRAL SERVICES-GRACEY COMPUTER FIRST AID EQUIPMENT LOAN AGREEMENT (TCH-F022)

Clarksville-Montgomery County School System

Employee Name:		Phone:	
Item Description	Serial/ID Number	Date Issued/ Issued By	Date Returned/ Received By
Example:, Dell/Lenovo, Power Adapter, AV Adapter, Security Cable			
I understand computers are provided district business use only.	ed by the Clarksville-Mo	ontgomery County Sch	nool System (CMCSS) for
Any devices left unattended need to I agree to properly care for and main computer in a safe place away from	ntain the computer. Suc	h care includes, but is	
Unlicensed software should not be lo to the Technology Coordinator or the			estions should be directed
I have read and agree to the terms of	of the CMCSS Technolog	gy Acceptable Use Poli	cy (<u>TCH-A002</u>).
I acknowledge and agree to the term said equipment if it is damaged, lost			responsibility for replacing
I understand all equipment remains form when my computer is repaired action taken against me.			
I further agree that all loaned equipm termination of my employment with (d properly checked in a	at Computer First Aid upon
Employee Signature		Employee Name (Print)	
		Date	