Teaching Equipment Loan Form (for off-campus use)　　　　　　CSLab

Name of Borrower: _____ CityU ID: _____ Dept: _____

Mobile: _____ Email: _____ Year: _____ Course: _____ *Full-time / Part-time

*please delete as appropriate

Justification: _____

FAS# / CS Barcode	Item Description	Serial No.	Loan out Handled by	Return to CSLab Handled by	Date

Loan out Date: _____ Expected Return Date: _____

Signature: _____ Date: _____

To be completed by Professor/ Lecturer / Supervisor in charge:

☐ This/these equipment will be used *outside* CityU campus.

Supervisor's Name: _____ Signature: _____ Date: _____

(Professor / Lecturer / Supervisor in charge should be aware that the item(s) loaned out will be recorded as staff loan, staff will be responsible for the excess of equipment replacement cost not covered by insurance in case of loss, theft, or damages of the loan item(s).

Remarks: _____

Endorsement: (Items loaned out of CityU Campus must be approved by Head of Department)

Approved by HoD (CS): _____ Date: _____

Remarks: _____