

EQUIPMENT PICK-UP AUTHORIZATION
L-113

1. **Attention:** By signing this form, you take responsibility for the media/equipment to be checked out and its return.
2. This check out of equipment is for the class period **only**.
3. The student's ID card is **required** for check out.
4. Please try to reserve the equipment prior to check out to be sure it is available when needed.

DATE _____

INSTRUCTOR _____

ROOM # _____

EQUIPMENT _____

AUTHORIZED STUDENT _____