

***This form should be completed when university property is taken off campus for use.***

*Prior to removal of the property, this form must be completed, and the original copy forwarded to the Property Management Department after a photocopy of the completed form has been made. Upon return of the property, the photocopy of the original form should be updated with the department head/director's signature indicating its return, and forwarded to the Property Management Department. The custodial department should retain photocopies of the complete documentation for this file.*

Department Name	Date
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**I, the undersigned, request authorization to move from campus of Southern University at New Orleans, the equipment referenced below, and further certify that:**

- The purpose of the removal constitutes official business of the university;
- I accept complete financial responsibility for the property during the removal period;
- The equipment will be protected from unauthorized use, access, alteration or destruction;
- Any sensitive or confidential data stored on this equipment will be appropriately secured;
- The property will only be used at the location indicated below:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Inventory Tag #	Property Description	Serial Number

Employee Name (Print): \_\_\_\_\_ Employee ID Number: \_\_\_\_\_

Employee Title: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Where agency property is lost, stolen, deteriorated, damaged or destroyed as a result an intentional wrongful act or a negligent act of any state employee, such person shall be financially liable to the University for the loss sustained.*

<b>Approval</b>	
Department Head/Director (Print): _____	Signature: _____
Date: _____	
<b>Property Custody Return Receipt</b>	
Department Head/Director (Print): _____	Signature: _____
Date: _____	