

UMGC Asset Management Form

Please complete this form and submit to the designated asset managers for any equipment move, regardless of whether it is asset tagged or not. This form must also be submitted to the IT Asset Management Team for all equipment that has been asset tagged. **A signature of acceptance by the user is required when the user is receiving a laptop.**

Name of IT support staff: _____

Date: _____

Hardware Assignment Type:

- ☐ New assignment (complete part A and B)
- ☐ Additional assignment (complete part A and B)
- ☐ Equipment swap (complete part A, B, and C)
- ☐ Return of equipment (complete part A and C)
- ☐ Location move (complete part A and B)

Ticket #: _____

User separated? ☐ Y ☐ N

A - User Contact Info

Name: _____	Bldg & Room #: _____
Department: _____	Old Bldg & Room #: _____

B – New/Existing Hardware

	Manufacturer	Model	UMGC Tag #	Serial #/Service Tag
Desktop				
Laptop				
Printer				
Other (Vs, Projectors)				
Docking Station				
Scanner				
Monitor(s)	Qty	Model	Size	

C - Returning Hardware

	Manufacturer	Model	UMGC Tag #	Serial #/Service Tag
Desktop				
Laptop				
Printer				
Other (TVs, Projectors)				
Docking Station				
Scanner				
Monitor(s)	Qty	Model	Size	

Notes/Condition: _____

The following are UMGC Practices for borrowing the equipment listed on the first page of this document from the Information Technology Department (IT):

1. I will exercise ordinary care when using, operating, transporting, and storing the equipment from the moment I take possession of the equipment until I return it to IT.
2. I will refrain from using the equipment for personal reasons without the express prior permission of my immediate supervisor.
3. I acknowledge that the equipment remains, at all times, the property of UMGC.
4. I will not loan this equipment to any individual, including UMGC employees, unless the individual possesses the authority to access the equipment and needs to do so for a legitimate business reason.
5. I will respond in a timely fashion to any requests from UMGC or individuals working on behalf of UMGC about the equipment I have in my possession. My failure to respond to any such request within seven days will result in a loss of privileges and will require the undersigned to return the equipment to the designated IT unit at UMGC immediately.
6. If the equipment is lost, stolen, damaged, or destroyed, I will contact the designated unit in IT immediately to report the incident including details associated with the incident and provide information such as a police report, if one exists.
7. If I fail to exercise ordinary care and the equipment is lost, stolen, damaged, or destroyed, I may be liable to UMGC for the reasonable value of the equipment as determined by UMGC which; I will reimburse UMGC within 60 days of the return date or within the guidelines to be declared by UMGC.
8. If I fail to exercise ordinary care and the equipment is lost, stolen, damaged, or destroyed, or if I fail to return the equipment on time, UMGC may initiate administrative action. This may include UMGC's refusal to lend equipment to me in the future. In addition, I understand that UMGC will not, in any circumstance, lend additional equipment to me unless I have returned overdue equipment and/or satisfactorily reimbursed UMGC for any charges UMGC has assessed against me.
9. When my employment with UMGC terminates, I will return the equipment to IT immediately. If I fail to return the equipment, I further understand that UMGC will take any action available to secure the return of their equipment or pursue reimbursement.
10. In the event of equipment malfunction, I agree to call the Help Desk or appropriate IT unit immediately to report the issue. I will not attempt to repair the equipment myself or to have the equipment repaired by a third party. I understand that if there is a delay in the repair or replacement of the equipment, IT may provide temporary equipment for my use. I acknowledge that the conditions outlined herein also apply to any temporary equipment provided.
11. Should I fail to return the equipment to UMGC on the date specified or upon request, UMGC may, at its sole discretion, demand and seek immediate payment for the value of the equipment at the time of loss.

I acknowledge that I have read, understand, and agree to all of the information above.

Employee Signature

Date

Print Name