



**SAM HOUSTON STATE UNIVERSITY
PROPERTY OFFICE
REQUEST TO REMOVE EQUIPMENT FROM CAMPUS**

Form RA-22
Revised September 2012

DEPARTMENT NAME: _____

ORGANIZATION NO: _____

I, the undersigned, request authority to remove Sam Houston State University property for purposes of performing official business of the University relating to my duties as an employee. I understand that I am accepting responsibility for information security for data stored on any computer or technological related equipment lost or stolen. In accepting responsibility, I agree to notify Information Technology if there is a possibility for sensitive information being compromised. I will immediately report to the appropriate local law enforcement official and University Police Department when theft occurs. I understand that I assume pecuniary responsibility for this equipment and I shall be pecuniary liable to the State for the loss thus sustained by the State.

I certify that the equipment will be taken to and remain at: _____

RENEWALS MUST BE COMPLETED EACH FISCAL YEAR.

*When equipment is returned, send a copy of this form with return date and Original Requester's and/or Department Head's signature to the Property Office.

SHSU TAG #	DESCRIPTION	SERIAL #	VALUE

NOTE: If Department Head is the Requester, signature of Immediate Supervisor is required below.

SIGNATURE OF REQUESTER

SAM ID OF REQUESTER

PRINTED NAME OF REQUESTER

PHONE NUMBER OF REQUESTER

SIGNATURE OF DEPARTMENT HEAD

DATE SIGNED

SIGNATURE OF OWNER OF PROPERTY

DATE SIGNED

SIGNATURE OF IMMEDIATE SUPERVISOR (See Note above)

DATE SIGNED

SIGNATURE OF PROPERTY COORDINATOR

DATE SIGNED

NOTE: If this equipment is loaned to another Agency, this form requires the President's or Agency Head's approval of both Agencies.

SIGNATURE OF PRESIDENT - SAM HOUSTON STATE UNIVERSITY (Lending Agency)

DATE SIGNED

SIGNATURE OF PRESIDENT/AGENCY HEAD (Receiving Agency)

DATE SIGNED

* SIGNATURE OF DEPARTMENT HEAD/IMMEDIATE SUPERVISOR

*DATE ITEM(S) RETURNED