

# **Billings Public Schools**

415 North 30<sup>th</sup> Street Billings MT 59101-1298  
(406) 281-5050 www.billings.k12.mt.us



## **Computer Equipment Checkout Form**

I, \_\_\_\_\_ am checking out the following computer equipment from  
\_\_\_\_\_ School.

I am checking out a:

Macintosh \_\_\_\_\_ PC \_\_\_\_\_

Desktop \_\_\_\_\_ Laptop \_\_\_\_\_

Computer Manufacturer \_\_\_\_\_

Computer Serial Number \_\_\_\_\_

District Asset Tag Number \_\_\_\_\_

Monitor Manufacturer \_\_\_\_\_

Monitor Serial Number \_\_\_\_\_

District Asset Tag Number \_\_\_\_\_

Other (please describe) \_\_\_\_\_

I understand that I am responsible for any loss or damage to this equipment and the District will not provide technical support. I understand that this equipment is District property and I will continue to comply with the terms of the Billings Public Schools Acceptable Use Policy.

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

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Building Administrator