



EMPLOYEE ISSUED DISTRICT PROPERTY EXIT CHECKLIST

Employee Name:			Id#:		
Campus:			Department:		
Item	Issued: Yes or No		Date Returned:		
Cell Phone					
MIFI					
IPAD					
Kindle					
Laptop					
2 Way Radio					
Keys					
Other					
Employee Signature:					
Campus Supervisor Signature					
Department Supervisor Signature					
Department Supervisor Signature					