

CALCASIEU PARISH SCHOOL BOARD

Off-Site Usage of Fixed Assets

School/Dept: _____ Loc Code: _____ Date: _____

Asset Tag # _____ Serial Number: _____

Brief Description: _____

I accept full and complete responsibility for any damages due to abuse, neglect, accidents or acts of nature. I will return the asset to the school in working condition.

Signed out by: _____
Print Name

Signature: _____ Date: _____

Approved by: _____ Date: _____
Principal/Department Head

Returned to school/department

Received by: _____ Date: _____

Additional items to be included for Off-Site Usage

ASSET TAG	SERIAL NUMBER	DESCRIPTION

This form **must** be kept on file at the school or department for all tagged assets used off-site. It must be kept on record for audit and/or insurance purposes.