



EMPLOYEE INFORMATION

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|------------|---------|------------|-------|-------------|
| LAST NAME | | FIRST NAME | | EMPLOYEE ID |
| DEPARTMENT | COLLEGE | TEL: | EMAIL | |

EQUIPMENT LIST

| Equipment Tag # | Equipment ID | Model # | Serial # | Cost |
|-----------------|--------------|---------|----------|------|
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EQUIPMENT LOCATION

The equipment will be located at the following address.

| | | | |
|---------|-----------|----------|-------------|
| ADDRESS | CITY/TOWN | PROVINCE | POSTAL CODE |
|---------|-----------|----------|-------------|

DECLARATION

As custodian of the above noted equipment, I certify that:

1. The use of the equipment will be to carry out my professional, teaching and / or research activities with the University of Saskatchewan.
2. Any personal use, including use for other business purposes, is incidental. If the actual use is different from that specified herein, I agree that any resulting personal benefit for income tax purposes will be a matter between myself and Canada Revenue Agency.
3. The equipment is property of the University of Saskatchewan. I undertake to return said University property upon request or should my employment with the University of Saskatchewan terminate.

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|-------------------------------|------|
| SIGNATURE | DATE |
| AUTHORIZATION (PEOPLE LEADER) | DATE |

Please return completed to your People Leader.

FOR OFFICE USE ONLY

| | | |
|--------------|-----------|----------|
| APPROVED BY: | ACCOUNT : | TAGGED : |
|--------------|-----------|----------|