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www.unh.edu/sas

EQUIPMENT LOAN AGREEMENT FORM

Student Name UNH	
ID #	
UNH Email	
Permanent Address	
Cell Phone #	
Semester	
Equipment Type/ID	
Due Date	
Replacement Cost	

Agreement:

- I understand that this equipment has been loaned to me in accordance with my approved UNH Student Accessibility Services (SAS) accommodations and is only to be used for the purposes stated therein.
- I understand that the equipment must be returned by the above due date. Failure to do so may result in charges to my UNH account for the replacement of the equipment.
- I understand that failure to return this equipment in complete working order may result in charges to my account for the repair or replacement of this equipment.
- In the event of my withdrawal from the university, I will return any equipment borrowed to UNH Student Accessibility Services (SAS) prior to leaving the university, or by the due date.
- By signing below, I agree to these terms.

Student Signature	
Date	

Office Use Only	
Date of return	
Condition	
Staff Signature	