

COMPUTER LOAN REQUEST FORM

Employee Name (Please Print) _____

Full-time Employment Date _____

Classification: Administrative/Professional Staff Support Staff Faculty

I agree to the terms and guidelines set forth by the College under the Computer Loan Policy. As such, I am requesting a loan in the amount of \$_____. I further acknowledge that any outstanding balance on this loan is due in full within twenty-one (21) days in the event I resign my position or my employment is terminated for any reason.

EMPLOYEE SIGNATURE _____ Date: _____

I am endorsing this request and attest that this employee is under my supervision and has not been given any form of disciplinary action within the last twelve (12) months. I further acknowledge that this employee is currently performing all job functions in a satisfactory manner.

Supervisor Approval: _____ Date: _____

FOR BUSINESS OFFICE USE ONLY

Approved **Denied** **Approved to be placed on waiting list**

Vice-President of Business Affairs and Treasurer: _____

Date: _____