

# Equipment Request

return completed form to ID Lab Mgr.

request date \_\_\_\_\_

Teacher \_\_\_\_\_

|   |  |  |
|---|--|--|
| Date _____<br>Period(s) _____<br><input type="checkbox"/> Laptop<br><input type="checkbox"/> LCD Projector  | Date _____<br>Period(s) _____<br><input type="checkbox"/> Laptop<br><input type="checkbox"/> LCD Projector | Date _____<br>Period(s) _____<br><input type="checkbox"/> Laptop<br><input type="checkbox"/> LCD Projector |
| You must return the equipment to the ID Lab at the conclusion of your reservation time as a courtesy to those who have reserved the equipment for the next day. |  |  |

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