

Temporary Alternate Work Location Equipment Inventory

INSTRUCTIONS Use this form to certify A&M System Offices owned equipment issued to an employee for use at a temporary alternate work location (AWL) and to identify the conditions for use in accordance with SAP [33.06.01](#), if applicable.

Employee Name	UIN	AWL Expiration Date
Department	AWL Location	

Equipment List

The following System Offices equipment or resource is designated for employee use at an AWL:

Type of Equipment or Resource	Inventory Number (if applicable)*	Quantity

*The Inventory Number begins with '01' or '26' and should be near the barcode. Docking stations, monitors, external keyboards, mice, printers and scanners do not have an inventory number.

Statement of Agreement

- Equipment and other resources issued to the employee will be maintained in a safe, secure and organized manner to avoid damage or loss.
- Equipment will be used in accordance with [Texas A&M University System Policies, Regulations](#) and System Offices Rules (including [Cybersecurity Procedures and Standards](#)).
- The employee is responsible for any loss or damage due to negligence to the above System Offices equipment.
- The employee will immediately return all System Offices-owned equipment, resources, etc. upon the request of the department head or supervisor, or upon termination or expiration of the need for the temporary alternate work location.

Employee Certification

I certify the equipment/resources listed above have been issued to me by the A&M System Offices and received in good working condition. I have read, understand and will comply with all the terms and conditions of the above *Statement of Agreement*.

Employee Signature

Date

Supervisor Review

I have reviewed this form with the employee and will hold the employee accountable to the terms and conditions of this agreement.

Supervisor Signature

Date