



Authorization for Use of University of Georgia Property at Non-UGA Locations

Regent's policy states: "Personal property such as portable personal computers or similar items may be removed from campus to the home of an employee or off campus site when the purpose is for business use only. Such use shall be tightly controlled and documentation as to the location and use shall be available at all times."

To comply with the Regent's policy and to provide for insurance coverage at the indicated address(s), authorization by the appropriate department head or director and dean or Vice President is required to use the University property listed below for University purposes. Vice Presidents and/or Deans are responsible for the implementation and documentation required under this policy.

Inventory Number(s)	Item Description(s)	Serial Number(s)	Dollar Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Off-Campus Address of Equipment	Use to be Made of Property
_____	_____
_____	_____

Date to be Removed _____ (mm/yyyy)	Date to be Returned _____ (mm/yyyy)
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Authorization for removal should be for a period no longer than 12 months. Prior to the expiration month, Property Control will send a confirmation as to whether the equipment will be returned or renewed for another period.

Yes	No	Will the above University equipment, which you are requesting approval to use off campus, contain any Sensitive University data? (For information and examples of sensitive data visit https://infosec.uga.edu/policies/classification.php)
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If so, by signing below you agree to:

1. Take all necessary precautions to protect any and all sensitive data while the University equipment is in your possession.
2. Adhere to the University's Guidelines for Handling Sensitive Information (<https://infosec.uga.edu/policies/sensitiveinfo.php>)
3. Return the equipment to the University once it is no longer needed outside of the University.

Individual Requesting	_____	_____
Authorization:	printed name	department name
	<i>Stephanie Lynn</i>	_____
	signature	current position held at UGA
	_____	_____
		position short title and number

Authorized Signatures Required:

Department Head or Director	_____	date
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Dean or Vice President	_____	date
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Distribution of approved request:
 original - Individual using property
 cc: Department

cc: Property Control Office for inventory records annotation