

STUDENT LAPTOP - BORROWER RESPONSIBILITY FORM
Cushing /Whitney Medical Library
Yale University

<u>PLEASE PRINT CLEARLY</u>		
Name: _____ (Borrower)		
Address: _____		
_____ City	_____ State	_____ ZIP Code
Phone: () -	Class: _____	

Agreement:

By signing this form I (Borrower) agree to the following terms and conditions:

1. Borrower accepts full responsibility for the security of the laptop and all components present at the point of Charge until Discharge. Should the laptop or any part therein become damaged, lost, or stolen the Borrower agrees to pay (up to \$2,000) for the laptop's repair or replacement.
2. Laptops may be borrowed for a period of up to 3 days. After the third day **Late Charges will begin to accrue at the rate of \$10 per day**, up to a maximum amount of \$300. A laptop that is thirty-one or more days overdue will be considered irretrievably lost and the Borrower will be solely responsible for the replacement cost of \$2,000.
3. Use of a laptop is granted in accordance with Yale's Appropriate Use Policy. (Note: the policy can be found on the laptop's desktop and a printed copy is available in the laptop case). Violations of this policy will result in denial of laptop future use.
4. Upon return to the Library the laptop will be restored to original operating parameters. All files not included in the laptop original programming will be discarded as part of the laptop restoration process. The Library is not responsible for files not included in the laptop original programming, or any loss or damage of any kind resulting there from.
5. Configuration and use of the laptop with non-library equipment is the sole responsibility of the Borrower and must be removed before the laptop is returned. The Library does not offer technical support for items outside of this Agreement.
6. The Borrower agrees to be the sole user of the laptop. Lending or renting of the laptop is strictly prohibited and considered a violation of the Agreement.
7. The Library reserves the right to deny use of a laptop to the Borrower for any reason.

Student's Net ID: _____ Email Address: _____

Student's Signature: _____ Date: _____

(STAFF MEMBER – Please file this completed form in Student Laptop folder by laptop cabinet.)