

Fixed Asset Check-Out Form (Period longer than 5 days)

Check-Out Date _____

Check-Out From: School _____ Wing/Building _____ Room _____

Fixed Asset Description

Fixed Asset Number

Custody Teacher or Employee Authorizing Check-Out

(Printed Name)

(Signature)

Building Administrator / Principal
(Signature required, check-out period longer than 5 days)

(Signature)

Check-Out To: School _____ Wing/Building _____ Room _____

(or) Check-Out To Other Location:

(Street Address)

(City / State) Contact Phone # _____

Teacher or Employee Receiving Property

(Printed Name)

(Signature)

To Complete Upon Asset Return:

Return Date: _____

Return Confirmed By: _____
Custody Teacher or Employee (signature)

Distribution / Filing Instructions:

- 1 – ORIGINAL – Filed behind FA-G Room Report at time of check-out
- 2 – ORIGINAL - Custody Teacher or Employee’s permanent files after asset return
- 3 – COPY – BFAC file at time of check-out
- 4 – COPY – Receiving teacher / employee after asset return

This form is to be used for the long term check-out of a fixed asset for a period longer than five (5) days. If the asset is to be checked-out for five (5) days or less, a Form FA-E (short form) is required. The original of this form is to be kept in the classroom or location’s asset form protective sleeve, filed behind the Form FA-G, Room Report, until the asset is returned to its assigned location.

Note: The teacher or employee checking-out property assumes all responsibility for said property until it is returned to its assigned location.
Note: The teacher or employee with protective custody must report all missing assets to building admin/principal immediately.