

West Carroll Special School District
Record of Temporary Consignment

Date of Consignment _____

School _____

Item _____

Serial Number _____

School Asset Tag _____

Condition of Equipment (Note any malfunctions or deficiencies)

I understand that I am responsible for this equipment during the time it is in my possession. I further understand that I assume responsibility for any loss and/or damage that may occur for any reason prior to its return to the school administrator.

Employee Signature _____

Date _____

Principal Signature _____

Date _____

Superintendent Signature _____

Date _____

Return Date _____

Principal Signature _____
