**GRAMBLING STATE UNIVERSITY**

### TITLE III PROGRAM

###### EQUIPMENT INVENTORY REPORT

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **LAA Category:** | | | **Focus Area:** | | | | | **Date:** | | | **Grant Year:** | | | |
| **Activity Title:** | | | | | | | | **Activity #:** | | | | | | |
| **Department:** | | | | **Award #** | | | | **Activity Director:** | | | | | | |
| **Equipment Description** | **Model #** | **Location**  **(Building, Office Room)** | | | **P.O.#** | **Purchase Cost** | **Date Received** | | **Manufacturer Serial #** | **Title III#** | | **State #** | **Received By** | **Assigned To** |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |
|  |  |  | | |  |  |  | |  |  | |  |  |  |

**This document must be completed in its entirety.**

This is to certify that the above equipment has been received in good order and adequate maintenance procedures as detail in EDGAR (74.34) will be maintained.

**Guidelines for Use of Title III Computer/Equipment**

1. **COMPUTER/EQUIPMENT MUST REMAIN IN ABOVE LOCATION.**
2. **CONSENT OF TITLE III OFFICE IS REQUIRED TO MOVE COMPUTER/EQUIPMENT.**
3. **ANY DAMAGES OR LOSS TO COMPUTER/EQUIPMENT MUST BE REPORTED TO TITLE III EXECUTIVE DIRECTOR IMMEDIATELY.**
4. **PERSON USING COMPUTER/EQUIPMENT IS RESPONSIBLE FOR PROPER USE AND MAINTENANCE.**
5. **FAILURE TO COMPLY WITH THE ABOVE GUIDELINES WILL RESULT IN LOSS OF PRIVILEGE TO USE COMPUTER/EQUIPMENT.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

**Inventory Specialist Date Activity Director Date Title III Executive Director Date**