



ENVIRONMENTAL MANAGEMENT CONSOLIDATED BUSINESS CENTER
INFORMATION TECHNOLOGY (IT) EQUIPMENT CHECK-OUT FORM

REQUESTOR INFORMATION

Name: Office:

IT Equipment Requested:

Requested Dates: From: To:

IT Ticket Number:

Is the Supervisor's / AD's approval provided in the IT Ticket? YES NO

If no, then the Supervisor / AD must sign this form.

Supervisor / AD Signature and Date Printed Name

Information Technology (IT) equipment is available for use by EMCBC staff (federal and support services contractor) subject to mission need and availability. The requestor agrees to abide by the following RULES FOR THE PROPER USE OF EMCBC IT EQUIPMENT:

- 1. I acknowledge and will comply with the EMCBC IRM Rules of Behavior.
2. Access and usage of all EMCBC IT equipment is subject to line-by-line auditing.
3. The requestor agrees to follow all EMCBC cyber security requirements as detailed in PP-IRM-240-08, Cyber Security-System Security Plan for General Support System (GSS).
4. The requestor agrees to protect the IT equipment and information from loss or unauthorized use.
5. The requestor agrees to follow the terms of software licenses and copyright agreements.
6. The requestor agrees not to download copyrighted software, unauthorized freeware or shareware from another system, including the Internet, onto the IT equipment.
7. This form authorizes the employee to remove the IT equipment from the EMCBC and serves as the official property pass.
8. The requestor agrees to return the IT equipment to the Office of Information Resource Management (OIRM) no later than the date specified on this agreement.
9. Personally Identifiable Information (PII) is not to be stored or transported on any IT equipment without written permission from the EMCBC Director.

REQUESTOR ACCEPTANCE OF RESPONSIBILITY: My signature below indicates that I understand and will comply with all EMCBC policies and procedures regarding cyber security and the proper use of IT equipment. I also understand that I am only authorized to retain this equipment until the date specified on this form.

Requestor's Signature Printed Name Date

Table with 2 columns and 4 rows for IRM Use Only. Rows include IT Ticket Number, IT Equipment, Check-Out Date, and Actual Returned Date.