

NC State University
Equipment Tracking Home/Portable Use Authorization Form CA-2

Department Statistics OUC 178501
Name of User Donald Martin Work Phone _____
Description of Equipment Dell Laptop CAMS Tag# _____
Use Type: Home Portable Other _____

Justification for home/portable use

Dell Latitude 5420 - SN: C020DK3

To be returned: Annual renewal Date _____ Other When no longer needed.

User Signature _____ Date 1/10/2022

Approved By

Signature _____ Print Name Terry Byron Date 1/10/2022
Title Dean Director Department Head Other Systems Administrator

CAMS system updated to "H"

Complete Upon Return of Equipment

The equipment listed above has been returned Return Date _____

User Signature _____ Date _____

Verified by (signature) _____ Date _____

Title Dean Director Department Head Other _____

Instructions for Initial Authorization: Complete the top portion of the form and save for departmental files. CAMS coordinator should update the online CAMS system to reflect "Home Use" as the condition code of the asset.

Instructions for Return: Complete the bottom portion of the form. CAMS coordinator should update the condition code of the asset using the online CAMS system. Retain this form for departmental files.