



TRANSITION TECHNOLOGY LOAN AGREEMENT

Agreement Between _____ and
North Carolina Division of Services for the Blind (DSB)

DESCRIPTION (Brand Name, Model #, Serial #, Fixed Asset Number, Manuals, Peripherals)

1. _____
2. _____

I, _____, understand the technology/equipment listed above and provided by the DSB is being loaned to me for my education and/or vocational preparation needs.

I have been informed of the RULES (listed below) regarding appropriate use of this equipment.

I agree to comply with these **RULES. I understand any violation of these RULES could result in loss of this equipment or could result in my having responsibility of payment for repairs.**

- My equipment is for my use ONLY. Friends or relatives, including children, are not to use my equipment. My equipment is not to be used for any family business activities.
- I will use loaned equipment for required school and job related activities.
- I will use my note-taker's Internet application only for required school research, assignments, and/or job related activities. I understand that the note-taker stores a list of all Internet sites visited, and that DSB Assistive Technology Consultants may review this list to insure appropriate use.
- I will not add additional software to my note-taker without prior approval. I will not download music, graphics, or videos unless directly related to my training or employment.
- I understand that abuse or failure to properly maintain DSB sponsored technology/equipment, including GPS software, may result in the loss of use of the technology/equipment.
- If I have any questions about the aforementioned agreement or encounter problems with my technology/equipment, I will contact my Vocational Rehabilitation Counselor whose name and telephone are listed below.

I understand this technology/equipment is being loaned to me and must be returned on the following date: _____.

Individual/Student Date _____

Parent/Guardian _____

Vocational Rehabilitation Counselor _____ Date _____

Vocational Rehabilitation Counselor Office Telephone _____