

Inventory/Educational Resource Acknowledgment

For state auditing and tax purposes, Delta County School District policy states that resources purchased within the Delta VISION HCP are the property of the Delta County School District and will be included in the School District's inventory. The Learner may have use of it as long as he or she remains a Learner in the VISION HCP. At such time as the Learner leaves the School District, the item must then be returned to the District (VISION HCP) or officially purchased by the family, if used within the program for three years (see Educational Resource Purchase Policy for details). *All Educational Resources must have a school district inventory sticker attached or engraved with the identification number– as deemed appropriate by Inventory Coordinator..*

Date: _____ Learner's Name: _____

Address: _____

Phone Number: _____ Name of RC: _____

Inventory Sticker Number (if applicable): _____

We have read the above statement and agree to abide by its guidelines for the following item:

Description of Item purchased:

Non-Computer Item Serial#: _____ Model #: _____

Computer System: Serial #: _____ Model #: _____

Monitor Serial #: _____ Model #: _____

Printer Serial #: _____ Model #: _____

The original disks must be turned in to the office. If the computer system is returned to the program, all manuals, cords, and components (keyboard, mouse, etc.) must also be returned.

Receipt Value: \$ _____

The Learner and/or family is responsible for the upkeep of items as long as the item is needed and in use with the Learner family.

Parent's Signature _____ Date _____

Learner's Signature _____ Date _____

VISION Representative's Signature _____ Date _____

Original disks delivered to office? _____

Inventory Sticker Attached? _____

Receipt attached? _____

Request/Check-Out For Recycled Educational Resources

1. RC – Complete the top portion of this form and submit it to IT personnel

Date: _____Learner’s Name: _____

Address: _____

Phone Number: _____Name of RC: _____

Item(s) needed (provide system requirements for computers):

Item on the Available Inventory list: _____ *Yes* _____ *No*

Office use only:

_____ Description of Item(s)	_____ Serial Number	_____ Inventory Sticker #
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_____ Description of Item(s)	_____ Serial Number	_____ Inventory Sticker #
_____ Description of Item(s)	_____ Serial Number	_____ Inventory Sticker #

Condition of item(s): _____

IT Department Check Out/RC Notification Date: _____Initials_____

Learner Signature: _____Date: _____

Parent Signature: _____Date: _____

Resource Consultant Signature: _____Date: _____

IT Personnel Signature: _____Date: _____

Returned/Valuation Educational Resource Item(s)

Date: _____ Learner's Name: _____

Address: _____

Phone Number: _____ Name of RC: _____

Inventory Sticker Number (if applicable): _____

Description of Item(s):

The Learner has decided to:

- Purchase this Educational Resource item from the VISION Program for the amount determined on this worksheet.
- Return this Educational Resource item to the VISION Program.

Item(s) were received in:

_____ Good Condition _____ Fair Condition _____ Poor Condition

Valuation Section (if applicable)

Original Receipt Value: \$ _____

Current Value/Purchase Price: \$ _____ (depreciated values are determined by the Program Tech Coordinator and Valuation Procedure).

There are no finance plans available, therefore, all purchases must be paid in full.
All items purchased will have been used within the program for a minimum of three years prior to being eligible for purchase.

Learner Signature: _____ Date: _____

Parent Signature: _____ Date: _____

RC Signature: _____ Date: _____

IT Personnel: _____ Date: _____