

Physical Science Department Faculty Equipment/Chemical Checkout Form

Borrower's Information:

Last Name _____

First Name _____

Email _____

Equipment/Chemical Information:

Date chemicals/equipment needed _____

Anticipated date chemicals/equipment will be returned _____

Please fill out the following chart with the chemical(s) (with full chemical name) or equipment to be borrowed and the amount of chemical(s) needed.

Equipment or Chemical	Quantity	Room #	Area in Room

Other Information:

If you have any other request that is not covered above, special instructions or any comments, please list them.

How are these items to be used? Please specify if they are to be used in the GRCC classroom or an event. If they are not for classroom use, please describe the nature of the event and how GRCC is involved in the event.