

Appendix B6

Instructions for completing the Request to Use University Equipment, Facilities and Services in Conjunction with Non-University Outside Activity

Any use of university equipment, facilities or services with regard to an outside activity must be approved prior to the activity. In general, the use of these resources will be allowed only on a noninterference basis, and a charge may be assessed.

An employee who has received University approval to engage in an outside activity may request approval for the use of University equipment, facilities, or services in connection with the activity. The University must approve the use in advance. The employee must request such approval by completing and submitting this form. The form should be attached to the Disclosure of Outside Activities and Financial Interests. If in the course of the work, the employee anticipates a change in the use or dates of use of University resources, a new request for approval must be submitted immediately.

UNIVERSITY OF FLORIDA
REQUEST TO USE UNIVERSITY EQUIPMENT, FACILITIES AND SERVICES
IN CONJUNCTION WITH NON-UNIVERSITY OUTSIDE ACTIVITY

An employee who has received University approval to engage in an activity may request approval for the use of University equipment, facilities, or services in connection with non-university outside activity. The University must approve the use in advance. The employee must request such approval by completing and submitting this form. The form should be attached to the *Outside Activities and Financial Interests* Report. The use of any of these resources will be allowed only on a non-interference basis, and there may be a charge for such use. If in the course of the work, the employee anticipates a change in the use or dates of University resources, a new request for approval must be submitted immediately.

EQUIPMENT

Identify equipment description (e.g., fax, e-mail, computer decal #, etc.) and describe manner in which it will be used: _____

—

Specify dates of use: _____ List account(s) identified for reimbursement: _____

Location and address where the equipment will be used (e.g., home, office, other);

Department and college or other area(s) in which equipment is assigned:

Associated charges (attach basis for determination or explanation if no charge): \$

Signature and Title of Administrator (Custodian) Responsible for the Equipment

Date

FACILITIES

Identify facility, include location and manner in which the facility will be used:

Specify date of use: _____ List account(s) identified for reimbursement: _____

Department and college or other area(s) in which facility is located: _____

Associated charges (attach basis for determination or explanation if no charge): \$

Signature and Title of Administrator (Custodian) Responsible for the Facility

Date

SERVICE

Identify service (including names of employees or students, computing service, etc.) and describe manner in which the service will be used:

—

Specify dates of use: _____ List account(s) identified for reimbursement: _____

Location and address where the equipment will be used (e.g., home, office, other);

—

Department and college or other area(s) in which equipment is assigned:

Associated charges (attach basis for determination or explanation if no charge): \$

—

Signature and Title of Administrator (Custodian) Responsible for the Service

Date

I hereby certify that the information described is accurate and complete and my use of university equipment, facilities, and services as reported will be solely in conjunction with activities approved on my Outside Activities and Financial Interests Report, which is attached to this request.

APPROVALS:

Chair or Supervisor Date

Dean or Director (or Designee) Date

Office of the Vice President
for Business Affairs Date

Please Print Name and Campus Address and Box #

Employee's Signature Date

Copies of completed form must be sent to: Division of Human Resource Services, dean or director, department chairperson or other appropriate administrator and employee. OAA-GA-L-268/8-2012