GRADUATE STUDENT

Computer Interest & Contract Form. By completing this form, this does NOT guarantee a computer, but indicates your interest.

To be eligible for a PC or Macintosh computer, the following criteria apply:
1) The student must be currently enrolled in a UNL graduate program.
2) The student must have an office in the department in which the computer is to be housed.

It is understood that technical support and/or warranties are not offered for any computers received under this program. DO NOT CALL Information Services Labs personnel with questions about these computers! Instead, users are encouraged to utilize departmental technical personnel for any support issues relating to hardware or software that may arise. For a fee, users may get assistance from Information Services Computer Repair (472-5785) or Custom Support (472-8846).

It is understood that this computer will be maintained by the department in which the student is enrolled and will be for the exclusive use of the student and/or department. The computer cannot be rented or sold to another department, organization, student or to an outside party.

Upon receipt, the computer becomes property of the specified department. ASUN and UNL Information Services claim no responsibility for defective machines. If for any reason the computer is not being used or not functioning, it must be sent to university inventory.

Circle one preference: PC Mac

Student Name: ____________________________ Student ID#: ____________________________

Department/College: ____________________________

Student Office Location
Bldg./Room #: ____________________________ Phone: ____________________________

Email Address: ____________________________ Alternate Phone: ____________________________

Student Signature: ____________________________ Date: ____________________________

As acting Head/Chair of the Department of ____________________________

Within the College of ____________________________

I hereby accept the terms and conditions of this contract.

Department Head/Chair printed name: ____________________________

Department Head/Chair signature: ____________________________

Department Head Address (Bldg./Room#) and Phone#: ____________________________

Department Head: phone number ____________________________

Department: email address. ____________________________

________________________________________ ASUN Office Use ____________________________

Equipment Serial Numbers:
Monitor CPU Keyboard

ASUN staff initials: __________ Date: __________