## RESERVATION REQUEST FORM

**OMK MOBILE TECHNOLOGY LAB (MTL)**

**Date Request Submitted:**

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### INSTRUCTIONS for RESERVATIONS

On the attached inventory sheets, initial each line item in the checked-out column that you wish to reserve. When you receive the equipment, ensure all items that were reserved are in the cases. Note any discrepancies and notify the program coordinators. Please line out items/inventory sheets that are not applicable. Fax or e-mail those sheets, along with this document to the OMK office:

- **University of Idaho/OMK**  
  - E-Mail: omk@uidaho.edu
- **Linda Gerber**  
  - Office: 208-334-2332
  - 322 E Front St., Ste. 390  
  - or: 208-334-2332
  - Boise, ID 83702  
  - Fax: 208-334-2333

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### Actual dates of Event:

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### Name of person making reservation: (include cell and/or office phone #’s, e-mail)

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### Name of person using the MTL: (include cell and/or office phone #’s, e-mail)

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### Name of person responsible for submitting written report due within 10 days (include cell and/or office phone #’s, e-mail).

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### Event Name:

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### Location:

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### Purpose:

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### Brief Activity Description:

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### Anticipated return date:

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### Identify the military connection for the event (For example: are there any military children/dependants, if so what branch/connection):

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### NOTES:

Users of the MTL are responsible for replacing any lost or broken equipment. The end user is responsible for providing adequate technical support to meet the program’s needs. If the equipment is to be shipped, the end user will normally assume all costs of shipping. It is the user’s responsibility to arrange for pick-up/delivery and the timely return of the equipment.
INSTRUCTIONS for RETURN: Assure all the equipment that was checked out is contained in the cases. Note and notify the staff of discrepancies. Return the equipment at the prearranged time. Upon check in, ensure that who ever receives the equipment initials off in the check-in column. Complete and return the attached MTL Use Report within 10 days of your event.

Signature: I __________________________ acknowledge above instructions and requirements.