

PROCEDURE FOR LIBRARY OF ASSISTIVE TECHNOLOGY/DEVICES AND ADAPTIVE EQUIPMENT FOR USE BY INDIVIDUALS WITH DISABILITIES

Assistive Technology/Devices for use by individuals with disabilities can be borrowed from the Disability Management System (DMS) Monday through Friday, from 8:00 a.m. to 5:00 p.m. by calling 919-668-6213, 684-8247 or 684-8231. Our office is located at 402 Oregon Street, Suite 102, Durham, NC 27708.

These devices are available at no charge to organizations within the Duke community who may have occasion to need them, including but not limited to:

- Office of the President
- R.D. Thomas Center
- Washington Duke Inn and Golf Course
- Office of Services for Students with Disabilities
- Office for Institutional Equity
- Residence Life and Housing Services
- Special Events
- Disability Services Liaisons
- Human Resources
- Assistive Listening Technology Network
- Student Affairs
- Auxiliaries
- Fuqua School of Business
- Law School
- Athletics

****Please Note:** The above list is not all-inclusive. If the office requesting use of these devices does not appear on it, copy identification badge of the individual making the request, complete the sign out sheet and issue the device.

Please refer to the comprehensive Assistive Technology/Devices Lending Library list for available devices.

INSTRUCTIONS FOR SIGN OUT OF ASSISTIVE TECHNOLOGY DEVICES and ADAPTIVE EQUIPMENT

- **DMS Staff completes information on sign out sheet and instructs caller to pick up equipment the Disability Management System 402 Oregon Street and bring some form of identification (such as Duke ID badge, driver's license, etc.)**
- **DMS has requestor sign check out sheet and gives copy of form to requestor.**
- **DMS makes copy of identification badge, driver's license or other form of identification of the individual checking out equipment and attaches copy to sign out sheet.**
- **DMS checks out appropriate equipment to individual.**
- **DMS ensures that devices have fresh batteries, if applicable.**
- **Original copy of form in placed in Sign-Out Book for tracking.**

SIGN OUT SHEET FOR ASSISTIVE TECHNOLOGY DEVICES and ADAPTIVE EQUIPMENT

Name:	Date:
Department:	Tel. No.
Purpose/Where to be Used:	
Name of Person Assuming Responsibility for Device:	Contact Tel. No.
Address:	Date to be Returned:
Type of Device Borrowed:	
Notification Kit # _____ Assistive Listening System _____ (Specific Device Borrowed, e.g., name on identification tag) TTY Machine _____ Other _____	
Check one: Student Employee Other	

I understand that these pieces of equipment are the property of Duke University. I further understand that they are sensitive pieces of equipment and need to be handled carefully. I will return them on the date listed above.

Signature: _____
 (Signature of Individual Borrowing Device)

<u>For DMS Office Use Only:</u>	
Copy of ID badge or other ID attached	Yes _____ (Signature)

Device Returned:	_____
	(Date)
Received By:	_____

06/02/2003