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For new Faculty Members

Name:							
Type of Co	ntract:	- Assoc - Assit - Visit - RTD (ciate Professor tant Professor ting Professor (Ricercatore a tempo deter Assegno di ricerca) Student ent	minato)			
Faculty: _				<u></u>			
Start of Co	ontract	:					
End of Con	tract:						
Room:							
Before lead to the res	_		rsity the equimpment/goods ment.	needs to be returned			
Telefon:	yes	no	Number:				
Returned o	n		_ to	(signature ICT)			
PC:	yes	no	Name:				
Returned o	n		_ to	(signature CS-Tech)			
Notebook:	yes	no	Name:				
Returned o	n		_ to	(signature Purchasing)			
Mobile:	yes	no	Туре:				
Returned o	n		_ to	(signature Purchasing)			
Keys:	yes	no	Rooms:				
Returned on Secreteria			_ to	(signature CS-			
Card:	Student/Campus/Guest Number:						

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Returned on Secreteriat)		to		(signature	CS-
Books: yes	s no	Quantity:			
Returned on _		to		(signature	Library)
Other items: _					

Returned on _____ to ____ (signature Personell

Office)

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