

# SwI STEM Equipment Delivery Participation Form 2023-2024



*To be completed by each participating teacher.*

Teacher Name:	<input type="text"/>		
School Name:	<input type="text"/>		
School Address:	<input type="text"/>		
City, State, Zip:	<input type="text"/>	School County:	<input type="text"/>
Teacher Primary Phone:	<input type="text"/>	Teacher E-mail:	<input type="text"/>
School Phone:	<input type="text"/>	School's F/R Lunch Percentage:	<input type="text"/>
Grade(s) Taught:	<input type="text"/>	Estimated Number of Students Taught Per Year:	<input type="text"/>
STEM Subject(s) Taught:	<input type="text"/>		
School Start Time:	<input type="text"/>	School End Time:	<input type="text"/>
		Time Zone:	<input type="text"/>
Administrator Name:	<input type="text"/>		
Administrator Email:	<input type="text"/>		

## *Statement of Assurances*

Our school is pleased to be a participant in the Southwest Indiana STEM Resource Center's Equipment Delivery Program. As a building administrator, I am aware that the instruments/materials will be used in the classroom by students. In conjunction with the participating teacher, I will see that the instruments/materials are protected from indiscriminate student use, theft, or malicious damage by keeping the instruments/materials in a supervised area during usage and in a locked area when not in use. If instruments/materials are lost or damaged in any way (including packaging), a Lost/Damaged report will be filled out by the participating teacher and the SwI STEM representative will be notified immediately. Repetitive or excessive damage or loss will result in replacement fees and/or loss of lending privileges for the school and teacher(s) involved.

## *Disclaimer*

Materials and activities included through the Southwest Indiana STEM Resource Center have been field-tested and are believed to be safe and accurate when used as written and under appropriate laboratory/classroom conditions. However, variation in local conditions may affect the outcome. It is recommended that all activities are teacher- tested for safety and reliability before being used with students in the classroom. It is assumed that good laboratory/classroom practices will be followed when using these activities. This includes but is not limited to the appropriate use of hand, eye, clothing protection as well as proper disinfection of equipment between individual student use.

Teacher's Signature:	<input type="text"/>	Date:	<input type="text"/>
Administrator's Signature:	<input type="text"/>	Date:	<input type="text"/>

Please return signed forms to:  
SwI STEM Resource Center  
University of Southern Indiana  
8600 University Blvd.  
Evansville, IN 47712

Form may also be scanned and e-mailed to: [pdwalling@usi.edu](mailto:pdwalling@usi.edu)