

NATIONAL TAIWAN UNIVERSITY

Disability Support Services

Equipment Loan Application Form

Personal Information of the Borrower			
Name		Student ID No.	
College		Department	
Contact No.		Email	
Disabilities (incl. type and degree)			
Loaned equipment			Quantity
<input type="checkbox"/> Wheelchair (No.: _____)			
<input type="checkbox"/> DVD (No.: _____)			
<input type="checkbox"/> Other (Please specify: _____)			
Loan date:		Estimated date of return:	
Counselor's seal		Counselor's seal	
Purpose:			
Signature of the Borrower:			
Actual date of return:			
Counselor's seal:			