

<b>Remote Assessment Project Scotland (RAPS) Loan Pool request form</b>			
<b>RAPS Centre</b>			
Centre Name:			
Centre ID:			
<b>Centre representative requesting Loan</b>			
Name:			
Phone:		Fax:	
E-Mail:			
<b>What is the item you would like to loan?</b>			
		RAPS ID (if available):	
<b>Name of person loan is for:</b>			
<b>On-line assessment</b>			
Has this individual completed the on-line assessment?	YES	NO	
Date of Assessment (if known):			
Assessment ID:			
<b>Declaration</b>			
I agree to:			
a) Accept responsibility for the item I am borrowing and will arrange insurance where required.			
b) Replace the item in the event of the item being damaged or going missing.			
c) Return the item within the time frame requested.			
Signature of centre representative:			Date:

Please return form to:  
 RAPS Loan Pool, AbilityNet Scotland, P.O.Box 28423, South Queensferry, EH30 9ZN  
 or  
 FAX: 0131 331 7418