



OFFICE OF DEAF AND HARD OF HEARING (ODHH)
ASSISTIVE COMMUNICATION TECHNOLOGY (ACT) PROGRAM

Assistive Listening System (ALS) Request

ODHH (360) 902-8000 V/TTY or 800-422-7930 V/TTY

DATE OF REQUEST

Reservation

1. ORGANIZATION REQUESTING ALS <input type="checkbox"/> ODHH <input type="checkbox"/> DSHS ADMINISTRATION (SPECIFY): <input type="checkbox"/> OTHER (SPECIFY):	2. PLANNED PICK UP DATE (MM/DD/YYYY)
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3. EVENT TYPE AND EVENT DATE	4. RETURN DEADLINE
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5. BORROWER'S REPRESENTATIVE'S NAME

6. ADDRESS

7. PHONE NUMBER	8. E-MAIL ADDRESS
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NOTE: For ODHH/RSC Staff Use Only Equipment Training (Required)

9. NAME OF BORROWER'S REPRESENTATIVE TRAINED	10. PERSON TRAINING (ODHH / RSC STAFF)
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11. Equipment Check-Out (Attach separate sheet if space is needed.)

12. Sent Condition <input type="checkbox"/> Equipment turns on <input type="checkbox"/> Equipment transmits amplified sound <input type="checkbox"/> Batteries tested <input type="checkbox"/> All parts included <input type="checkbox"/> Equipment sent in satisfactory condition	NOTES
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13. I have received training on the proper use and care of the ALS. I have read the Loan Agreement and accept responsibility for equipment care.	14. I have provided training to demonstrate proper use and care of the ALS.
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BORROWER'S / TRAINEE'S SIGNATURE DATE	ODHH / RSC STAFF'S SIGNATURE DATE
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15. Return

The borrower is responsible for reporting any equipment problems upon return. When signed below, ODHH / RSC has accepted the equipment back into inventory.

Assistive Listening System (ALS) Loan Agreement

I. Ownership

The ALS equipment belongs to the Washington State Department of Social and Health Services (DSHS), Office of the Deaf and Hard of Hearing (ODHH), Assistive Communication Technology (ACT) program. ODHH also contracts with Regional Service Centers (RSCs) to provide ALS equipment in regions outside the DSHS Headquarters area. The ACT Program Manager manages the ODHH ALS loan program.

II. Eligibility for ALS Equipment Use

Equipment may be borrowed short term by administrations and divisions of DSHS, non-profit organizations and businesses (Borrowers) to provide communication access for individuals with hearing loss. ODHH and RSCs reserve the right to deny requests for ALS loan based on a prior request by a different Borrower. Borrowers must pick up and return ALS at ODHH or the applicable RSC.

III. Reserving ALS Equipment

Borrowers in the DSHS Headquarters area must contact the DSHS ACT Program Manager at odhh@dshs.wa.gov for ALS availability. Borrowers in other parts of Washington must contact the nearest RSC to their event and arrange to borrow ALS. All Borrowers must fill out and submit an *ALS Request Form #11-066* to reserve the ALS.

The Borrower must receive training on how to hook up and disconnect the ALS for the event. Training with ODHH or RSC staff takes approximately 30 minutes. The ODHH and the RSC staff prefer the person who receives the training to be the person who will be setting up the ALS for the event. ODHH and RSCs reserve the right to deny the loan if the individual responsible for setting up is not present for training.

IV. Damages

Borrowers are responsible for the care of equipment while in their possession. If a Borrower returns equipment that is broken, or has missing parts worth \$200 or more, the ODHH or RSCs can bill the Borrower for the cost of damages. **[For DSHS only:** The ODHH may Journal Voucher (JV) Borrowers for damage per *2009 Asset Management Guidelines, Chapter 5, Inventory Transfers and Loans, Loan Procedures, #5.*] In addition the ODHH or RSCs can refuse the Borrower further use of the ALS equipment. ODHH will not hold the Borrower responsible for normal wear-and-tear or any previous damages of the equipment. The ODHH or RSC has ten (10) business days to report to the Borrower whether there has been damage to the ALS equipment by the Borrower.

V. Non-Compliance

If a Borrower repeatedly returns ALS equipment that is not packed properly, or not cared for properly, or does not pay the cost of damage or loss from a previous loan, the ODHH and RSCs reserve the right to refuse further use of the ALS equipment.

VI. Returning ALS Equipment

Borrowers and/or representatives are expected to return the ALS equipment on time and in the same condition it was checked out. If the Borrower and/or representative experienced any problems with the ALS equipment, they must report the problems to ODHH or RSC staff upon returning the ALS.

15. Returned Condition <input type="checkbox"/> Equipment turns on <input type="checkbox"/> Equipment transmits amplified sound <input type="checkbox"/> Batteries tested <input type="checkbox"/> All parts included <input type="checkbox"/> Equipment returned in satisfactory condition <input type="checkbox"/> Equipment returned in <u>other</u> condition								NOTES							
16. BORROWER'S / TRAINEE'S SIGNATURE						DATE		17. ODHH / RSC STAFF'S SIGNATURE						DATE	
REF DOC SUF	TRANS CODE	M O D	FUND	MASTER INDEX		SUB OBJ	SUB SUB OBJECT	ORG INDEX	WORK CLASS	COUNTY	CITY/TOWN	PROJECT	SUB PROJ	PROJ PHAS	
				ALLOC	BUDGET UNIT				MOS						

This section is to be filled out by the Borrower.

Date of Request. Top right corner: Print the date that you are filling out this form to borrow the ALS.

1. **Organization.** What is the agency, division or office that wishes to borrow the ALS? Check the box that applies. If your agency, division or office is part of DSHS, check "DSHS." If you check "Other," print the name of the Organization borrowing the ALS.
2. **Planned Pick Up Date.** Give the date that you plan to pick up or receive the ALS equipment. This may be two or three days before the actual meeting/event.
3. **Event Type and Event Date.** Print the description and location of the meeting/event where the ALS will be used. Include the actual date your meeting/event is scheduled to take place.
4. **Return Deadline.** Fill in the return date. This is the date you must bring back the ALS after your meeting/event. Another agency, division or office may have a reservation following yours.
5. **Borrower's Representative's Name.** Provide the name of the Borrower's Representative (staff person) who will be picking up the equipment and receiving training about connecting and disconnecting the ALS.
6. **Borrower's Representative's Organization.** Give information about the Borrower's Representative, like where he works or if he lives near one of the Regional Service Centers for Deaf and Hard of Hearing (RSC).
7. **Phone Number.** Provide a direct contact phone or TTY number for the Borrower's Representative or an appropriate person who is involved in planning your meeting/event.
8. **E-Mail Address.** Provide a contact E-mail for the Borrower's Representative or an appropriate person who is involved in planning your meeting/event.

When done filling out 1-8, E-mail this form to ACT Manager at: odhh@dshs.wa.gov or Fax to (360) 902-0855.

Borrowers do not write below this line except Signature blocks 13 and 15. The remaining blocks are to be filled out by ODHH/RSC staff.

9. **Name of Borrower's Representative Trained.** Print the name of the Representative who is picking up the ALS and being trained in proper care, connection and disconnection. If the name is the same as block 5, write "Same."
10. **Person Training.** First circle the word ODHH or RSC Staff to show whether ALS is being loaned by ODHH or by an RSC. Print the name of the ODHH/RSC staff member who is providing training.
11. **Equipment Check Out.** ODHH/RSC staff will need to write down in this block the type of equipment and the TAS Tag number (blue) for each piece of ALS Equipment being loaned. If several pieces of equipment are loaned, and there is not enough space in Block 11, please attach a separate inventory sheet. This will assist the Borrower later to confirm that all equipment is accounted for.
12. **Sent Condition.** Enter the condition of the equipment being loaned. Was it in good condition when it was loaned? Include any previous damage in the "NOTES" section so that this Borrower will not be blamed.
13. **Borrower's/Trainee's Signature.** The Borrower is required to read the information on the "Loan Agreement," page 2 of this form number 11-066 and attend training. The Borrower's signature in Block 13 indicates that he understands his responsibility to care for the ALS.
14. **ODHH/RSC's Signature.** ODHH/RSC staff who provided training to the Borrower's Representative signs here.
15. **Returned Condition. (Page 2)** ODHH/RSC staff fills out this section when ALS is returned. Was there any difference in the condition of the ALS since it was loaned? Include condition comments in the "NOTES" section. Add extra pages if needed. If there was no damage, the ODHH/RSC staff signs, indicating the acceptance of ALS back into the ALS inventory.

Coding blocks at the bottom of page 2 are for ODHH use only.