

## Ship-to-Home Waiver Request Form

Please complete all sections and obtain required approvals before submission.

Employee Name:	_____
Department:	_____
Item Description:	_____
Justification:	_____

### Approval Checklist

Criteria	Yes
Employee resides out of state	
Item is low-risk (see ITAM guidelines Asset Risk assessment)	
Item does not require OIT configuration or asset tagging	
Employee on sabbatical or conducting off-site work	
Dean approval obtained	

### Approvals

Employee Signature:	_____	
Dean Signature:	_____	
Controller Signature:	_____	

### References

UCCS IT asset management guidelines: [https://vcf.uccs.edu/sites/default/files/2025-02/UCCS%20Campus%20Procedure%20ITAM\\_03.31.2025.pdf](https://vcf.uccs.edu/sites/default/files/2025-02/UCCS%20Campus%20Procedure%20ITAM_03.31.2025.pdf)

Procurement service center receiving: <https://www.cu.edu/psc/procurement/receiving>