City of Torrance

Employee Computer Loan Program
Participation Agreement

*(Please **print** all information)*

Name _____ Employee No._____

Department _____ Position_____

Phone # _____ Email _____

PRIOR TO PURCHASE:

1. Participant has read and understands the "Employee Computer Loan Program Guidelines" for City employees.

2. Participant has selected:

☐ **Purchase from any vendor(s)**
Up-front cost to the employee. The employee will be reimbursed up to $2,000 within 2-4 weeks.

The above-named employee ("participant") has received the "Guidelines for the City of Torrance ("City") Employee Computer Loan Program" for City employees. Participant elects to participate in the financing arrangement offered under this program by the City of Torrance. Participant further agrees to and accepts the terms and conditions as outlined in the "Employee Computer Loan Program Guidelines."

Participant's Signature_____ Date _____

ECLP Coordinator _____ Date _____