

ထပ်ကွဲဖိလၢအအိၣ်လၢဘဲဒီးအိၣ်ခွဲၣ်စၢၣ်အစီၣ်



တၢ်ငါတၢ်ဒုတၢ်အူပီးလီလံၣ်တၢ်အၢၣ်လီၤအဖီၣ်

RPS205တၢ်ဒုတၢ်အူပီးလီလၢအဘၣ်ဃးဒီးကွဲၣ်ဟ့ၣ်ငါဝဲဒုၣ်ပုၤကွဲၣ်ဖိလၢအမၤလိတၢ်ဒုတၢ်အူလၢအသးစဲဝဲသ့ၣ်တဖၣ်သ့ၣ်လၢအပူၤဘၣ်ကတၢ်န့ၣ်လီၤလၢတၢ်ဟ့ၣ်ပုၤကွဲၣ်ဖိလၢတၢ်ဒုတၢ်အူလၢကလၢဝဲလီၣ်ဝဲဒုၣ်လၢအဝဲသ့ၣ်အစီၣ်န့ၣ်.ကွဲၣ်ဖိကဘၣ်မၤပဲၤဝဲဒုၣ်ဖိဒီးဆၢဘၣ်က့ၤအိၣ်ဆူက့ၤတက့ၤမ့ၢ်အဲၣ်ဒီးငါလၢတၢ်ကိၢ်ခါန့ၣ်သ့ၣ်ဆၢဘၣ်ဟ့ၣ်အပူၤအိၣ်ဖိဒီးဖဲန့ၣ်ကတၢ်ကွဲၣ်ပုၤအခါန့ၣ်ဘၣ်ဆဲလီၤဝဲဒုၣ်လံၣ်တၢ်အၢၣ်လီၤအဖီၣ်န့ၣ်လီၤ.

ကွဲၣ်ဖိသ့ၣ်တဖၣ်တၢ်ဟ့ၣ်အိၣ်တၢ်ပျဲလၢကက့ၤစိၣ်ဝဲဒုၣ်ကွဲၣ်တၢ်ဒုတၢ်အူပီးလီလၢကွဲၣ်အကရၢၢ်အချၢမ့ၢ်တအိၣ်ဒီးလံၣ်အဝဲအံၤဒီးဟ့ၣ်အပူၤဒ်ဘၣ်န့ၣ်လီၤ.

လံၣ်ဃးဃၢ်ဖျါဝဲဒ်အဖီလံၣ်အသိး

- တၢ်ပီးတၢ်လီၤလၢန့ၣ်အိၣ်လၢတန့ၣ်အတီၢ်ပူၤန့ၣ်အလုၢ်အပူၤမ့ၢ်ဝဲဒုၣ် \$80.00 န့ၣ်လီၤ.
- ကဖိကန့ၢ်ဘၣ်ဝဲတၢ်ဒုတၢ်အူပီးလီလၢသ့ၣ်ဝဲဒုၣ်သ့ၣ်တမ့ၢ်တၢ်ဒုတၢ်အူပီးလီလၢအသိးဘၣ်.
- တၢ်ဒုတၢ်အူပီးလီအံၤကဘၣ်တၢ်စကဲအိၣ်ခိဖျါလၢတၢ်ဒုတၢ်အူသရၣ်မ့ၢ်ဒ်သိးတၢ်ကဟဲက့ၤဆၢကဒါက့ၤဘၣ်လီၤဘၣ်ဆးတၢ်ဆၢကဒါက့ၤမ့ၢ်န့ၢ်လီၤမ့ၢ် ၂၄သီ.၂၀၁၉.
- တၢ်ပီးတၢ်လီၤမ့ၢ်ဟါမ့ၢ်မ့ၢ်တမ့ၢ်ဟးစါန့ၣ်ကွဲၣ်ဖိဒီးမိၢ်ပၤသ့ၣ်တဖၣ်ကဘၣ်ဟံးန့ၢ်မ့ၢ်ဒါန့ၣ်လီၤ.
- တၢ်ပီးတၢ်လီၤမ့ၢ်ဟးစါန့ၣ်တၢ်ကဆၢတၢ်အလုၢ်အပူၤလၢတန့ၣ်အတီၢ်ပူၤဒီးတၢ်ကဒုးသ့ၣ်ညါန့ၢ်အလုၢ်အပူၤလၢနကဘၣ်ဟ့ၣ်ဒီးနကဘၣ်ဟ့ၣ်အလုၢ်အပူၤန့ၣ်လီၤ.

တၢ်အၢၣ်လီၤအိၣ်လီၤ

ကွဲၣ်ဖိအမံၤ: \_\_\_\_\_ ကွဲၣ်ဖိ ID #: \_\_\_\_\_

ကွဲၣ်ဖိအမံၤ: \_\_\_\_\_

မိၢ်ပၤပုၤကွၢ်ထွဲကွဲၣ်ဖိအမံၤ: \_\_\_\_\_

အိၣ်ဆိးလီၢ်ကျဲး: \_\_\_\_\_

လီၤတဲးစိး: \_\_\_\_\_ အံၤမ့ၢ်: \_\_\_\_\_

ယအၢၣ်လီၤတူၢ်လိၣ်ဝဲဒုၣ်တၢ်ပီးတၢ်လီၤယဟံးလီၢ်ဆိၣ်တၢ်သိၣ်တၢ်သီဖျါလၢအဖီခိၣ်ဒ်တၢ်ပၤလီၤဝဲဒုၣ်:

\_\_\_\_\_ နံၤသီ \_\_\_\_\_

(မိၢ်ပၤပုၤကွၢ်ထွဲကွဲၣ်ဖိအမံၤ)

KAREN

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\*\*\*\*\* (For Teacher Use Only)\*\*\*\*\*

Instrument Check-Out Date: \_\_\_\_\_

Instrument: \_\_\_\_\_ Serial # \_\_\_\_\_ Case Included: Y N

Instrument Condition: \_\_\_\_\_

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Instrument Check In Date: \_\_\_\_\_

Instrument: \_\_\_\_\_ Serial # \_\_\_\_\_ Case Included: Y N

Instrument Condition upon Return: Checked out instrument serial numbers must match this rental agreement.

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Comments (Damage Information.): \_\_\_\_\_

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\*\*\*\*\* (For Office Use Only)\*\*\*\*\*

**\$80 fee paid** \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Other \_\_\_\_\_

Date of Payment \_\_\_\_\_ Free/Reduced Waiver Completed Y N