District Laptop Assignment Listing

School_____ **Date**_____

Assigned to:Name	Assigned to: Title	Laptop Make	Laptop Model	Asset Tag#	Laptop Cart #
		Dell, Gateway, Apple, HP, etc.	Inspiron 3500, 5300, etc.	If no tag, indicate Serial Number	If assigned to an individual from a laptop cart

Administrator Signature: _____

This form must be accompanied by a completed Laptop Inventory Form for each laptop on the list.

Please send to Information Technology and Support Services via inter-ofice mail or fax to (908) 731-4366 by the required date.