



**Information Technology and Support Services
Technology Equipment Removal Form**



This form must be completed prior to **removing** any district technology equipment from its current location for repair, maintenance, etc.

School/Building: _____

User Information:

Name: _____

Phone: _____ Dept./Rm# _____

User Signature: _____

ITSS Signature: _____ Date removed: _____

Technology Equipment Information	
PC Model	
CPU serial #	
CPU Asset Tag #	
Printer Model	
Printer Serial #	
Printer Asset Tag #	
Other Model	
Other Serial #	
Other Asset Tag#	

Comments: _____

User Signature upon return: _____

ITSS Signature upon return: _____ Date returned: _____