



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



This form must be completed prior to **discarding** any district computer components or peripherals.

**ITSS Staff:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Make	Model	Asset Tag#	Serial #	Room #	Comments

**Reason for Retirement:** \_\_\_\_\_

**Reccommendation:** \_\_\_\_\_

**ITSS Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Building/Dept. Admin. Name:** \_\_\_\_\_  
(Please print clearly)

**Building/Dept. Admin. Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Submitted to HD: Date:** \_\_\_\_\_ **ITSS Staff Initials:** \_\_\_\_\_

**Input into database: Date:** \_\_\_\_\_ **HD Initials:** \_\_\_\_\_