

Computer Relocation Form

School

Teacher Name

BOE Number

Present Location (room number)

Destination(room number)

After equipment is moved your school technician will be given this form to make necessary inventory changes, and to come and connect all of your equipment. Please do not attempt to reconnect any of your equipment. **All relocations have to be approved by your school administrator.**

Please send the **completed form** (with your administrator's signature) to the **Technology Department**, where a work order will be entered.

Teacher Signature

Administrator signature

Date