COE Property Relocation Form

Name _____ V# _____ Date _____

Address (Where the property is going to be located)

_____

City _____ State _____ Zip Code _____

College of Engineering Status (Select All That Apply) ☐ Faculty ☐ Staff ☐ Postdoc ☐ Hourly Worker

Supervisor/PI _____ Department _____

Please list all items that have been relocated below (include make, model and manufacturer):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature _____

Person relocating property– *I acknowledge that I am responsible for the items that I take off of campus and am liable for any damage to the items on this form.*

_____

Approved by (Signature of Direct Supervisor) – *I approve of the relocation of the items on this form.*

_____

Dean or Associate Dean - *I approve of the relocation of the items on this form.*