**Surplus Mobile Phone Removal Request**

**(Attention: Use this form to return unwanted college-owned cell phones.**)

**To:** Christopher Tucker **From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(name of person making request)**

Property Control **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(department)**

Miller Bldg. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(position or title)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(signature)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(date of request)**

***Completion and submission of this form constitutes a formal request to have property permanently removed from your department. Depending on the condition and serviceability of these materials they may be redistributed by us for other departments on campus or may be disposed of.***

**Approval by department chair/head is required:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Signature date

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| --- | --- | --- | --- | --- | --- |
| Brief Item Description (Make and Model) | Department/Person Phone issued to | Condition E, G, F, P, Scrap | Operational?  Y or N | Sensitive Data Removed from Phone? (Describe Method) | Charger & Accessories Included? |
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Additional Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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