Baldwin County Board of Education



Career and Technical Education

Equipment Transfer/Delete/Disposal Form

Materials Management Division

School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If this is a transfer, put the school and teacher being transferred to:

If this is a deletion, put the reason for deletion

No disposal of equipment until approval is received from CTE

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Serial # | ID #/Asset # | Transfer To: | Reason for Delete |
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Teacher Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND ORIGINAL TO OFFICE OF CTE-LOXLEY COS FOR APPROVAL