

**BELEN CONSOLIDATED SCHOOLS  
TRANSFER OF EQUIPMENT REQUEST**

TRANSFER FROM -

SITE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

TRANSFER TO –

SITE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

BCS TAG#	DESCRIPTION (Including model #)	SERIAL NUMBER	DATE ACQUIRED	RECORDED VALUE/COST

Reason for transfer:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Administrator's Signature

Technology Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Supervisor's Signature \*Required for technology equipment; computers, printers, etc.

Picked up by: \_\_\_\_\_ Date: \_\_\_\_\_

Received at transfer site by: \_\_\_\_\_ Date: \_\_\_\_\_

Recorded on Assets inventory by: \_\_\_\_\_ Date: \_\_\_\_\_