

Form-3 Computer Retention or Return: Separation from Office

The Head of the Agency

Section	Details
1. Employee Details	
Name	
Designation	
Date of Separation	
2. Device Details	
Device Type (Laptop/Desktop)	
Brand & Model	
Serial Number	
Date of Issuance/Purchase	
Original Cost	
Depreciated Value	
3. Employee's Decision	(<input checked="" type="checkbox"/> Check one option)
Option 1: Purchase	<input type="checkbox"/> I choose to purchase the device at its depreciated value.
Option 2: Return	<input type="checkbox"/> I choose to return the device to the office.

Submitted by:

Verified by:

Approved by: