

## **Asset Management - Property Transfer Request Form**

Email copy to: assetmanagement@fullerton.edu

Department	Transferring From	•				
Department:			School or Division:			
Current Custoo	dian:		<u> </u>			
Department Pr	operty Coordinator Name	<b>)</b> :				
Department Property Coordinator Signature:				Date:		
Property Asset Tag		Desc	cription	Current	New	
			odel, Type)			
	ı <u>Data/Media Sanitization Relea</u> t Office will not process your re		red for any <b>equipment containing Electro</b> e completion of the form.	nic storage med	<b>dia</b> . The	
Has the equipmer	nt been Sanitized? Yes	□ No □	Has the equipment been Unlocked	? Yes N	o 🗌	
Comments:						
Department <sup>-</sup>	Transferring To:					
New Department:			New School or Division:			
New Custodia	n:					
New Departme	ent Property Coordinator	Name:				
New Department Property Coordinator Signature:				Date:		
		Office U	Jse Only			
Asset Management Cor	mments:		,			
Changes Made to Peop	olesoft: Yes:	No:				
Name:		Signature:		Date:		