

INVENTORY CHANGE FORM



We see th	ic luture myou.	CECTION A TRANS	0.0.0					we see the luture in you.	
		SECTION A – TRAN	SAC	TION IDENT	IFIC				
		Equipment Request:		Transfer		Dispos	al		
From (Asset Steward):			To (Asset Steward):						
From (Department Name):			To (Department Name):						
From (Building Name):			То	(Building Nam	e):				
From (Room/Location Number):				(Room/Location	on N	umber):			
	Device / Eq	uipment Type(s):				Disposal	Type / Instruct	tions:	
☐ Desktop / Laptop Computer				Cannibalized (Include explanation in Justification)					
Furnitur			Casualty Loss (Include explanation in Justification)						
Printer /			Gift / Donation (Include donor info in Justification)						
=	/ Switches		Lost / Missing Inventory (Include Explanation/Attach Police Report)						
Server			Ļ		•			or info in Justification)	
	I / Mobile Phone		Ļ					info in Justification)	
	i.e. iPads, surfac		Ļ	· · · · · · · · · · · · · · · · · · ·		•	n/Attach Police	e Report)	
	rtation Equipme	nt		Surplus to W	arer	iouse			
Other	l: /Cl			1 4		1			
Sanitize Med	lia (Clean Equipr	ment for Transfer)		Yes		No			
Consitive	/Data that couts		be /	Justification Non-Sensitive					
		ins personal and/or confidential info) LL Disposal Types):		j Non-Sensitive	е				
		SECTION B – EQUI	PM	ENT IDENTII	FIC#	NOITA			
Asset Tag Number	Building/ Room	Description		Mal	ke/N	Model	Serial #	Media Serial # (i.e. Hard Drives, Memory)	
*Note: If ad	ditional space is n	eeded, please include attachment "Secti	on B	Continued"	Cł	neck here i	if "Section B Cont	tinued" is attached	
As the "Asset Steward" listed above, by signing below you affirm that the media listed above and/or attached has been surrendered to the Office of Information Technology Services (ITS) or University Warehouse for system transfer sanitization or irreparable data destruction in accordance with Norfolk State University Procedures for Media Sanitization. The Information Security Officer (ISO) or designee affirms that the employee is authorized to surrender media to ITS for sanitization or University Warehouse for irreparable data destruction. SECTION C – DEPARTMENT IDENTIFICATION									
Originating Department									
Asset Stewar	rd Signature:	Oligillat	Phone No: Date:						
Approved by Department Head:			Phone No:						
Approved by Department Head: Phone No: Date: Information Technology Services						Date.			
		Illiormation	reci		ices				
Data Cleared	·						Date:		
Receiving Department									
Received by: Phone No: Date:									
By signing as, the Warehouse Employee below you affirm that the media listed above has been surrendered to the University Warehouse for irreparable data destruction according to Norfolk State University Procedures for Media Sanitization. The Warehouse Manager affirms that the warehouse employee is authorized to perform irreparable data destruction according to University Media Sanitization Procedures.									
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		<u> </u>	אי וג	arehouse					

Revised: 2018-22-10 Reset Form



INVENTORY CHANGE FORM (Section B Continued)

Employee Name	Phone Number	Email Address	Department	Ticket Number

	SECTION B – EQUIPMENT IDENTIFICATION (Continued)						
Asset Tag Number	Building/ Room	Description	Make/Model	Serial #	Media Serial # (i.e. Hard Drives, Memory)		



INVENTORY CHANGE FORM INSTRUCTIONS

1. SECTION A – TRANSACTION IDENTIFICATION

- a. Equipment Request 'Transfer'
 - Select this box if you are transferring equipment from one NSU facility/department/location/floor to another NSU facility/department/location/floor.
 - ii. Fill out the transfer information, which includes: <u>From</u> asset steward, <u>To</u> asset steward. <u>From</u> department, <u>To</u> department. <u>From</u> Building, <u>To</u> Building. <u>From</u> Room/location, <u>To</u> Room/location.
 - iii. Device / Equipment Type(s) Select the category that describes the equipment you are transferring.
 - iv. Sanitize Media ITS/Media equipment will need to be sanitized before the transfer can be complete. Please check 'Sanitize Media' 'Yes' for the following device types:
 - a. Desktop / Laptop Computer
 - b. Printer / Fax
 - c. Server
 - d. ShoreTel / Mobile Phone
 - e. Tablets (i.e. iPads, surface pro)
 - v. Disposal Type / Instructions not required to be completed when transferring an asset.
 - vi. Data Type / Justification
 - 1. Sensitive Select this box if the equipment you are transferring contains sensitive and personal information. Sensitive data is any data of which can compromise the confidentiality, integrity and/or availability and could have a material adverse effect on NSU interests, the conduct of NSU programs or the privacy to which individuals are entitled. Examples are: computers, laptops, tablets, mobile phones, servers, etc.
 - 2. Non-sensitive Select this box if the equipment you are transferring does not contain sensitive and personal information. Examples are: printers, fax machines, switches, routers, etc.
 - 3. Justification is not required when transferring equipment.
 - vii. Continue to Section B Equipment Identification
- b. Equipment Request 'Disposal'
 - i. Select this box if you are disposing of an NSU asset.
 - ii. Fill out: <u>From Steward. From Department. From Building. From Room/Location Number.</u>
 - iii. Device / Equipment Type(s) Select the category that describes the equipment you are disposing.
 - iv. Sanitize Media ITS/Media equipment will need to be sanitized before the disposal can be complete. Please check 'Sanitize Media' 'Yes' for the following device types:
 - a. Desktop / Laptop Computer
 - b. Printer / Fax



INVENTORY CHANGE FORM INSTRUCTIONS

- c. Server
- d. ShoreTel / Mobile Phone
- e. Tablets (i.e. iPads, surface pro)
- v. Disposal Type / Instructions Select the category that describes the equipment you are disposing. Include an explanation in the 'Justification' area.
- vi. Data Type / Justification
 - 1. Sensitive Select this box if the equipment you are disposing contains sensitive and personal information. Sensitive data is any data of which can compromise the confidentiality, integrity and/or availability and could have a material adverse effect on NSU interests, the conduct of NSU programs or the privacy to which individuals are entitled. Examples are: computers, laptops, tablets, mobile phones, servers, etc.
 - 2. Non-sensitive Select this box if the equipment you are disposing does not contain sensitive and personal information. Examples are: printers, fax machines, switches, routers, etc.
 - 3. Justification An explanation is required for asset disposals.
- vii. Continue to Section B Equipment Identification.

2. SECTION B – EQUIPMENT IDENTIFICATION

- a. This section is required for both transfers and disposals.
 - i. Asset Tag Number record the NSU asset tag/sticker number.
 - ii. Building/Room record the NSU building and NSU room number that the asset will reside in when picked up by the warehouse.
 - iii. Description record a brief description of the asset.
 - iv. Make/Model record the make/model of the asset.
 - v. Serial # record the serial number of the asset.
 - vi. Media Serial # for ITS use only
 - vii. If additional space is needed, please include 'Section B Continued' attachment.
 - viii. Continue to Section C Department Identification

3. SECTION C – DEPARTMENT IDENTIFICATION

- a. Originating Department
 - i. Asset Steward Signature, Phone Number and Date is required.
 - ii. Department Head Signature, Phone Number and Date is required.
- b. Information Technology Services
 - i. Data Cleared by ITS, Phone Number and Date is required
- c. Receiving Department
 - i. Received By, Phone Number and Date is required
- d. Central Warehouse
 - i. Central Warehouse will complete this section.