

Date:/...../.....

LAPTOP REQUEST FORM

Requester Name: Employee ID:.....

Designation: Department/Section:

Period of issuance: From:/...../..... to/...../.....

Justification for the laptop requirement:

Signature of the requester with date

Comments of the Head of the Department/Section:

Signature with date

Comments of the Technical Officer, Computer Center:

Signature with date

Comments of the Head, Computer Center:

Signature with date