



Hardware/Software Maintenance Request Form

This form must accompany your device when you bring it to the center for any type of service. Please adhere to the COVIC-19 protocol by sterilizing your device in front of the receiving person.

Employee Name

Date

Program and Center Location

PCDC Inventory Tag

Device Name & Model Number

Serial Number (if applicable)

Staff witnessing COVIC-19 sterilization procedure (Signature)

Signature of Employee

Briefly describe the issue(s) you are having in the space below:

IT Department:

Software: Upgraded _____ Installed _____ Removed _____

Hardware: Installed _____ Removed _____

Briefly describe the maintenance performed on this device along with any further instruction(s):

Technician Signature

Completion Date

Device returned to employee:

Signature

Date

*Please scan this form