

Equipment Repair Form

Teacher Name: _____ School: _____ Room: _____

Chromebook Laptop Tablet/iPad Other: _____

Date: _____ What's the problem: _____

Damaged by Student? If so, Name: _____

If so, was it reported to the office? Yes No

Asset Tag #: _____ Cart #: _____ Machine #: _____

Replacement Asset Tag #: _____ Comment: _____

Reviewer Name: _____ Date: _____

Description of Repair: _____

Final Reviewer Name: _____ Date: _____

Comment: _____

Ready to go? Yes No (Reason: _____)