

Electronic Devices Handover Form

Date of Handover

Department / Team

Location

Employee / Recipient Details

Full Name

Employee ID

Designation

Device(s) Details

#	Device Type	Brand/Model	Serial Number	Asset Code	Accessories	Remarks/Condition
1	Laptop				Charger, Bag	
2	Mobile Phone				Charger	
3	Others					

Remarks

Handed Over By (IT/Admin):

Name Date:

Received By (Employee):

Name Date:

Important Notes

- This form must be filled and signed by both the issuer and the recipient at the time of handover.
- All device serial numbers and accessory details should be accurately documented.
- The recipient is responsible for the safe custody and legitimate use of the devices listed above.
- Loss or damage of any equipment must be immediately reported to the relevant department.
- Upon return or exit, all assigned devices must be returned in good condition, subject to inspection.