

Southwick Tolland Granville Regional School District

Technology Division

Equipment Damage / Loss / Theft Report Form

STGRSD Faculty/Staff are required to report any damage, loss or theft of STGRSD owned and operated equipment as soon as possible and submit a completed copy of this form within 24:00 hours of the incident.

Please note where an injury occurs as a result of any damage, loss or theft of STGRSD owned and operated equipment, employees are required to report the incident immediately, and submit a completed Incident Report and Investigation Form.

Damage / Loss / Theft - Reported By	
Employee Name:	Employee Number:
Position/Title:	Department:
Phone:	Email:
Incident Information	
Incident Date (dd/mm/yy): ____/____/____ Time of Incident (24 hour clock):	
Reported on: ____/____/____ Time Reported (24 hour clock):	
Supervisor:	Job Site: Specific Location:
Equipment Information	
List of Equipment Damaged / Lost / Stolen (Please Specify)	
Equipment Location at Time of Damage / Lost	
Computer Make /Model /Serial Number & Asset Tag No# with Hostname:	

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How Was the Equipment Damaged / Lost / Stolen? (Complete Description)	
Description of Damage to the Equipment	
Estimated Cost of Repair / Replacement	
Person Responsible for Equipment Student or Staff Name:	

Was the Equipment Damage / Loss / Theft reported to the Police?

☐ Yes ☐ No

If yes, please provide:

Police Report Information	
Police File #:	Officer In Charge:
Station #:	Phone #:
Email:	

A Police Report (if Theft) and replacement cost invoice must be attached.

Acknowledgement & Agreement

Supervisor: _____

Signature: _____

Date: _____