



### SWCC Office Relocation Request

Employee requesting relocation: \_\_\_\_\_

Department: \_\_\_\_\_

Reason for move: \_\_\_\_\_

Current Location: \_\_\_\_\_ New Location: \_\_\_\_\_

Date Desired for Move: \_\_\_\_\_

Technical equipment to be moved (include blue tag #, red tag # or serial #):

Computer \_\_\_\_\_ (tag or serial #)

Phone \_\_\_\_\_ (ext #)

Printer \_\_\_\_\_ (tag or serial #)

Other \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

VP: \_\_\_\_\_ Date: \_\_\_\_\_

To be notified:

IT

HR

Facilities

Asset Manager

Mail Room

Web Master

Switch Board Operator

Telephone Manager

Campus Police