



**IT DIVISION  
FACULTY OF MEDICINE  
UNIVERSITY TECHNOLOGY MARA**

**ICT EQUIPMENT LOAN FORM**

**EQUIPMENT INFORMATION (Fill by requester)**

|            |  |
|------------|--|
| EQUIPMENT  |  |
| MODEL/TYPE |  |

**EQUIPMENT DETAIL (Fill by IT Division)**

|                                |           |        |          |
|--------------------------------|-----------|--------|----------|
| SERIAL NUMBER OF THE EQUIPMENT |           |        |          |
| NOTEBOOK/MONITOR:              | KEYBOARD: | MOUSE: | PRINTER: |
| OTHER/REMARKS                  |           |        |          |
| PROVIDE BY                     |           |        |          |
| DESIGNATION                    |           |        |          |
| SIGNATURE/STAMP &<br>DATE      |           |        |          |

**RECEIVED BY (Fill by receiver)**

|                    |  |
|--------------------|--|
| NAME               |  |
| DESIGNATION        |  |
| SIGNATURE<br>&DATE |  |
| NOTES              | <b>Programme :</b><br>:<br><b>Date :</b><br><b>Time :</b><br><b>Venue :</b><br><b>Ext No/Hp No :</b> |

**RETURN DETAIL**

|                    |  |
|--------------------|--|
| NAME               |  |
| DESIGNATION        |  |
| SIGNATURE<br>&DATE |  |
| REMARKS            |  |