

OKLAHOMA DEPARTMENT OF CAREER AND TECHNOLOGY EDUCATION INVENTORY ADJUSTMENT REQUEST FORM

REQUESTED BY _____ **DATE** _____
(School/Division) (Program/Name)

TO: INVENTORY SPECIALIST, OKLAHOMA DEPARTMENT OF CAREER AND TECHNOLOGY EDUCATION
1500 WEST SEVENTH AVENUE, STILLWATER, OKLAHOMA 74074-4364

SUBJECT: REQUEST FOR USE OF EQUIPMENT REQUEST FOR ADJUSTMENT TO REQUEST TRANSFER OF EQUIPMENT
LOCATED AT EQUIPMENT POOL FIXED INVENTORY FILE TO _____ PROGRAM _____
PID _____

Please use separate adjustment form for each vocational program and return to the Inventory Specialist.

If you have any questions concerning this request form, please contact the Inventory Specialist at 405-377-2000.

Indicate reason for requesting inventory adjustment under the "Reason for Inventory Adjustment Request" (stolen, salvage, request for trade-in or transfer, and other) .

	Description of Equipment	Serial #	State ID#	Purchase Date	Acquisition Cost	Reason for Adjustment	Recommended Action (State Use)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

RECEIVED BY _____ **APPROVED** _____ **AUTHORIZED BY** _____

REMARKS _____

State Supervisor/Coordinator
Occupational/TCS/SKLCN

Superintendent/Director

Inventory Specialist