



## TISD Device Incident Report

*This form is to be used in the event a TISD device is presumed to be stolen, lost due to neglect, or is found to be intentionally damaged. Staff should turn this form in to the IT Office within 48 hours.*

Student ID: \_\_\_\_\_ Device Barcode: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ AM / PM

Location of Incident: \_\_\_\_\_

**Please provide a brief description of the type of device missing including any identifying information including: Asset Tag, Classroom Number, and the last student to use it.**

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Police Report attached: \_\_\_\_\_ yes \_\_\_\_\_ no