

Employee Remote Work Equipment Declaration

Employee Details

Name:

Employee ID:

Department:

Position:

Date:

Equipment Details

Item	Brand/Model	Serial Number	Company Asset ID	Condition

Other Equipment and Accessories:

Declaration

I hereby confirm that I have received the equipment listed above in working condition for the purpose of remote work. I acknowledge responsibility for proper usage, care, and return of these items in accordance with company policy.

Employee Signature:

Date:

Manager/Supervisor Signature:

Date:
