

Device Registration Form No. \_\_\_\_\_

Student Name: \_\_\_\_\_ Level and Section: \_\_\_\_\_ Date filed: \_\_\_\_\_

1<sup>st</sup> Registration  2<sup>nd</sup> time  3<sup>rd</sup> time  Others \_\_\_\_\_

Reason (s): \_\_\_\_\_

Endorsed by/date: \_\_\_\_\_ Approved by / date: \_\_\_\_\_  
Department Principal Property Manager

Brand /Model: \_\_\_\_\_ MAC Address: \_\_\_\_\_ Checked by /date: \_\_\_\_\_

Licensed Software:

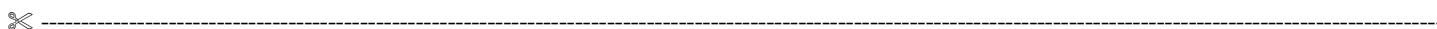
Operating System:  
 Microsoft Windows XP/Vista/7/8  Linux/Open source  Others \_\_\_\_\_

Antivirus: Date of Expiration:  
 Paid Version \_\_\_\_\_  
 Free Version \_\_\_\_\_

Office Suite:  
 Microsoft Office 2007/2010/2013  Open Office / Libre Office  Others \_\_\_\_\_

Other Licensed Software: \_\_\_\_\_

Remarks: \_\_\_\_\_



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