



**GERMAN-MALAYSIAN INSTITUTE
ASSET TRANSFER FORM
(When Transfer Location)**

Description	Make/Model	Serial No.	FA No.

<u>Reason(s):</u>			
Transfer From:		Transfer To:	
Building		Building	
Room		Room	
Department		Department	

Applicant Details:	Endorsed By: (HOS/HOD)
Name:	Name:
Position:	Position:
Section:	Section:
Date:	Date:
Signature:	Signature:

Asset Management Unit Acknowledgement	
Transfer Date: Transfer Time: Transfer By:	Acknowledge & Checked By Signature: Position: Date: