## UNIVERSITY OF CONNECTICUT CENTRAL STORES CERTIFICATION OF DATA INACCESSIBILITY FORM

## Please use ONE form for multiple computers.

## PRINT this form. Sign, date, and attach it to your ACT-39 form.

I personally verify for each of the computers listed on ACT-39 #\_\_\_\_\_\_ (or for each of the computers listed below) that the hard drive was operating during my examination and that each hard drive contains no recoverable confidential, sensitive, proprietary or copyrighted data or programs prohibited by their license to remain. In lieu of such an examination, I know absolutely that the hard drive(s) contain no such information.

PRINT Name	Department	U-Box #
Signature	Date	
Check this box if the hard drive	could not be verified and needs to l	oe destroyed.

Check this box if the hard drive was removed by the department.

Location of removed hard drive:

**UCONN # ON COMPUTER:** 

 $\square$ 

**DESCRIPTION:**