

CERTIFICATE OF MEDIA SANITIZATION

TECHNICIAN PERFORMING SANITIZATION

Name:	Title:
Organization:	Location:
Phone:	Email:
Signature:	Date:

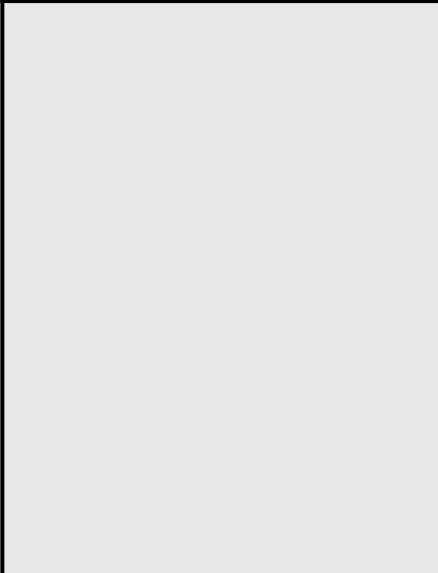
MEDIA INFORMATION

Vendor/Make:	Media Type:
Model Number:	Serial Number:
Property Number:	Device / Media Source:
Risk Classification:	Device Serial Number:

MEDIA SANITIZATION DETAILS

NIST Sanitization Method:
Sanitization Technique:
Tools Used (Include Version):
Verification/Status:
Validation:
Notes:

Before



After



Parent Asset	Specifics
Device Type	
Asset Name	
Brand/OEM	
Series	
Model No.	

Storage Type	Specifics
Form Factor	
Brand/OEM	
Model No.	
Part No.	
Capacity	