

## Hardware Request Form

ALL INFORMATION MUST BE INCLUDED FOR THIS REQUEST TO BE CONSIDERED.

*Attach supporting information. When completed, return all forms to your building principal.*

Name: \_\_\_\_\_ Building: DZ [ ] LN [ ] MS [ ] HS [ ] Room: \_\_\_\_\_

Department: \_\_\_\_\_ Subject Taught: \_\_\_\_\_ Grade level: \_\_\_\_\_

Hardware requested: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Quantity: \_\_\_\_\_ Unit Price: \_\_\_\_\_ Total price \$ \_\_\_\_\_

Manufacturer/Vendor: \_\_\_\_\_

Vendor's Address: \_\_\_\_\_

Website: \_\_\_\_\_

New York Standard(s) that this technology will meet: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How this will be used to improve student learning? \_\_\_\_\_

\_\_\_\_\_

*You must have reviewed this hardware before requesting it. Please provide results of the review.*

How did you review this?	How is the software licensed?	
Online Demo <input type="checkbox"/>	Per computer <input type="checkbox"/>	Free <input type="checkbox"/>
Using trial mode <input type="checkbox"/>	Per user <input type="checkbox"/>	One-time purchase <input type="checkbox"/>
Other: <input type="checkbox"/>	Per Building or District <input type="checkbox"/>	Annual renewal <input type="checkbox"/>

Additional requirements (i.e. table, power, network connection)? \_\_\_\_\_

Signatures/Initials Required	Approved	PRINCIPAL: Building Funding Avail.	Director of Technology: Denial Lack of Tech Funding	Denial: Other Reason
	√			
<b>Principal</b>				
<b>Director of Technology</b>				
<b>Deputy Superintendent</b>				
<b>Asst. Supt. Business</b>				

*All requests that are denied will be returned to the originator.  
Approved hardware will be ordered by the Technology Department.*