

SUFFIELD PUBLIC SCHOOLS REQUISITION FORM

NEW REQUEST: <input type="checkbox"/> YES <input type="checkbox"/> NO		RENEWAL/UPGRADE: <input type="checkbox"/> YES <input type="checkbox"/> NO	
SCHOOL NAME:		DATE:	
<input type="checkbox"/> SOFTWARE <input type="checkbox"/> HARDWARE <input type="checkbox"/> DEVICE APP		<input type="checkbox"/> DEVICE APP <input type="checkbox"/> DIGITAL RESOURCE	
Identify Person (s), subject area, or department REQUESTING			
Identify location for Installation / Setup of Resource: (Desktop, Chromebook, iPad..etc)			
Educational Justification:			
Student Use: <input type="checkbox"/> Yes <input type="checkbox"/> No		Teacher Use: <input type="checkbox"/> Yes <input type="checkbox"/> No	
REQUEST DETAILS (To be filled out by teacher)			
Name / Description of Request:			
Qty Requested:	Total Fee:	Per License: \$	<input type="checkbox"/> Free
<input type="checkbox"/> IEP-Special Education <input type="checkbox"/> Special Education PK-5 <input type="checkbox"/> Special Education 6-12			
ADMINISTRATIVE APPROVAL			
Reviewed by School Admin: <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
School Admin will route to Special Education Supervisor if IEP is checked YES			
Approved by Assistant Superintendent of Curriculum <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
BUDGET ACCOUNT NUMBER:			
TECHNOLOGY REVIEW (FILLED OUT BY TECHNOLOGY DIRECTOR)			
TECHNOLOGY COMPLIANCE:			
Privacy ACT Compliance: <input type="checkbox"/> Yes <input type="checkbox"/> No			
TECHNOLOGY SPECIAL INSTRUCTIONS			
Special Instructions:			
Order Date:	Total Amount:	PO Number:	
<input type="checkbox"/> RECEIVED by Technology Department		Director of Tech Approval: _____	
<input type="checkbox"/> COMPLETED Tech: _____		Date: _____	

* Help desk ticket will be updated when received by IT Department. If your help desk ticket is still "Pending Approval"
Please seek an update from your Building Administrator