# Request for Computer Purchase
## *Grant Funded Operations Only*

Date:_____                           Service Request #_____

Complete this form and submit to IT Help Desk to obtain approval from the CIO and Vice President of Information Services.

Grant Name:_____     Grant End Date:_____

Funding Source Org Number:_____

Grant Administrator:_____     Phone #:_____     E-mail:_____

Contact person:_____     Phone #:_____     E-mail:_____

**Business Case Questions:**
1.   Why do you need to purchase computer(s)?


2.   Will they be used every day? _____
3.   How will they be replaced when they become obsolete? _____
4.   Will this computer replace an existing one (yes/no)? _____
      a.   If yes, where and who is the current user (provide bldg./room # and user name)? _____
      b.   What is the current Asset Tag # (from the barcode label) of computer(s) being replaced? _____
5.   Other than the Base Software, what other Software will be needed?
      _____

**Computer Request (<mark>please itemize using the price list</mark>):**

| Quantity | Description | Unit Cost | Extended Cost | GL |
|----------|-------------|-----------|---------------|-----|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | Total | _____ | |

**Computer Location:**

| Campus | Bldg./Room | Employee | Phone | E-mail |
|--------|-----------|----------|-------|--------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

<mark>**This section is to be completed by the IT Department after approval and installation is scheduled.**</mark>

Serial #_____     Date:_____
Serial #_____     Date:_____
Serial #_____     Date:_____

Computer Technician (*print name)*:_____     Signature: _____

<mark>**This section is to be completed by the Grant Administrator after the equipment has been installed.**</mark>

I (*Grant Administrator name*)_____ acknowledge the computer specified above was received and installed for (*Grant name*)_____
Finance has my approval to transfer the funds into IT's org ____16310000 631001 96_____

Grant Administrator Signature:_____     Date:_____

*Dr. Pedersen's Approval*: _____

Revised:  6/8/2016

# Additional Lines for Grant Computer Request

**Service Request #**_____

**Computer Location:**

| Campus | Bldg./Room | Employee | Phone | E-mail |
|--------|-----------|----------|-------|--------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

**This section is to be completed by the IT Department after approval and installation is scheduled.**

Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
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Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____
Serial #_____          Date:_____

Computer Technician (*print name):*_____          Signature: _____

Grant Administrator (print name):_____          Signature:_____ Date:_____