

# COMPUTER REQUEST FORM (ALSO RELATED EQUIPMENT)

(Attach copy of Director's approval email)

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

DEPT#: \_\_\_\_\_

Phone#: \_\_\_\_\_

Specific Purpose for request:

Cost Center to use for payment: \_\_\_\_\_

Approved by: \_\_\_\_\_

## **NEED SPECIFICATIONS**

- |                                  |                      |                                |       |         |
|----------------------------------|----------------------|--------------------------------|-------|---------|
| 1) Computer Type?                | Dell (std for Staff) | Apple (design/specilized need) |       |         |
| 2) Platform?                     | Laptop               | Desktop                        | iPad  | Surface |
| 3) If Laptop?                    | No docking system    | Docking system needed          |       |         |
| 4) Extended warranty/ AppleCare? | No                   | Yes                            |       |         |
| 5) Monitors?                     | No                   | Yes-1                          | Yes-2 |         |
| 6) Mouse?                        | No                   | Yes                            |       |         |
| 7) Keyboard?                     | No                   | Yes                            |       |         |
| 8) Speakers?                     | No                   | Yes                            |       |         |
| 9) Other Equipment?              | No                   | Yes                            |       |         |

If yes, please give details:

10) Do you need special software (other than std Microsoft Office Suite)?

No

Yes

If yes, please give details:

Other details or equipment information: