

Technology Purchase Request Fill out and submit completed form electronically to TechRequest@rsd7.net

TECHNOLOGY SERVICES

Contact Name			_ Phone Ext	Deliver To School / Location		Date		
RATIONALE								
How will this requ	uest for software or h	ardware support o	r enhance instructi	on in the District?				
Who will be the as	ssigned end user of th	is purchase?						
FUNDING	General Funds		Federal Funds		Grant	Funds	Other	
Account #								
Site Administra Name of signer	ator's Signature A	· ·		irector, or Departme		Date ure is required for i		
Compute	r Hardware - Desktops	s, laptops, tablets. Te	chnology Hardw	are - Mobile carts, printers	s, document cameras, pro	ectors. Software -	· Licenses, apps.	
	Hardware Replacement? ☐ Yes ☐ No			al? □Yes □No	Online Softv	vare? □Yes □N		
Qty	Part Number		Des	cription		Unit Price	Ext Price	
	L	l .				Total Cost \$	l	
			DISTRICT	APPROVALS				
Can IT Staff su	ipport & maintain	purchase?	Yes No					
	proved by IT Dir	_		nature Approva	I		Date	
Curriculum Approval Name:			Signature			Date		
District Offic	ce ization Name:		Signatur	٩		Date		