



## Technology Equipment Request

Date Submitted: \_\_\_\_\_

Department Head: \_\_\_\_\_

Email: \_\_\_\_\_

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

Requested By: \_\_\_\_\_

Email: \_\_\_\_\_

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

Why equipment is needed:

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Equipment Requested :

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Apps Requested :

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Accessories(case, keyboard, stand, etc.):

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Supervisor Approval:

Date:

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