**New Technology Request Form**

Use this form when you want to purchase IT software or hardware within the school district and it is not available in the Technology Solutions Catalogue.

**STEP I**
Complete this form **AND** a purchase requisition form.

**STEP II**
Get your building administrator’s approval

**STEP III**
Send this form to the IT Department with the purchase requisition form. Keep copies for your records.

**STEP IV**
If approved, the product will be added to the Technology Solutions catalog. Your product will either be immediately ordered or put in the strategic plan for purchase as funds become available.
If denied, you may appeal. Please meet with your building principal if you want to appeal.

<table>
<thead>
<tr>
<th>Department/Grade Level</th>
<th>Building/School</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Person Making Request</th>
<th>Date of Request</th>
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<tbody>
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<thead>
<tr>
<th>Administrator/Principal Signature</th>
<th>Date Approved</th>
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</table>

**Section I: Description of Product & Costs**

**Location:** Product to be installed in which rooms? __________________________

**Software:** Is there an annual software license renewal? □ Yes □ No
  - If yes, what is the cost per license?
    \$ __________________

**Hardware:** Is there a maintenance contract? □ Yes □ No
  - If yes, what is the annual cost?
    \$ __________________

**Consumables:** Are there any additional materials needed? □ Yes □ No
  - If yes, what is the annual cost?
    \$ __________________

Suggested Vendor:

Name: ________________________________ Contact: __________________________

Phone: __________________ Web site: _______________________________________

Approximate date when is this product needed: ______________

**Training and Support:**

Is training required to use the product? □ Yes □ No
  - If yes, what is the cost?
    \$ __________________

Does the vendor charge for technical support? □ Yes □ No
  - If yes, what is the cost?
    \$ __________________

Please list any school districts that you know are using this product.

______________________________________________________________________________
Section II – Fit into the Information and Instructional Technology Plans

A: Hardware (If applicable)
1) Briefly state how the hardware fits into the district Instructional Technology Plan.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

2) Does this meet a need for a special group of students? ☐ Yes ☐ No
If yes, explain

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

B: Software (If applicable)
Software is for (check all that apply): ☐ Administrators ☐ Teachers ☐ Students

1) What curriculum standards are addressed through this software program?
   (Be specific about grade levels and content standard.)

________________________________________________________________________

________________________________________________________________________

2) How does this fit with and/or supplement adopted instructional material?

________________________________________________________________________

________________________________________________________________________

3) What is the most important skill/idea that your students would learn by using this program?

________________________________________________________________________

________________________________________________________________________

4) Does this meet a need for a special group of students? ☐ Yes ☐ No
If yes, explain

________________________________________________________________________

________________________________________________________________________

Section III – Additional Information

When you submit this request form, include or attach any additional information you want considered such as sales brochures or web pages you feel would provide critical or interesting information for consideration.

Section IV – Evaluation Phase (This section may be left blank when this form is submitted. The person submitting this request and a representative from the IT department will jointly work together to complete this section.)

1) Does this program require?
   Problem Solving? ☐ Yes ☐ No
   Decision Making? ☐ Yes ☐ No
   Investigation? ☐ Yes ☐ No
   Experimentation? ☐ Yes ☐ No
   Invention? ☐ Yes ☐ No
2) Content & Feature evaluation:
   Is the presentation of the content in line with your instructional method? □ Yes □ No
   Is the program sufficiently interactive? □ Yes □ No
   Is there a way of tracking the students’ progress? □ Yes □ No
   Is this program self-directed? □ Yes □ No
   Does this program:
     Meet a variety of student needs within your grade level or department? □ Yes □ No
     Read aloud to the user? □ Yes □ No
     Work with pairs or small groups of students? □ Yes □ No
     Require the user to read details and directions independently? □ Yes □ No

3) What kind of teacher support materials (blackline masters, etc.) comes with this program?

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Okay</th>
<th>Weak</th>
<th>Unacceptable</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Materials Quality</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
</tbody>
</table>

4) Program operation evaluation (to be coordinated with the IT department during the trial period):

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Okay</th>
<th>Weak</th>
<th>Unacceptable</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graphics Quality</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>Sound Quality</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>Manual Usefulness</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>Ease of initial use</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>Ease of installation</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Overall rating</strong></td>
<td><strong>5</strong></td>
<td><strong>4</strong></td>
<td><strong>3</strong></td>
<td><strong>2</strong></td>
<td><strong>1</strong></td>
<td><strong>NA</strong></td>
</tr>
</tbody>
</table>

Please detail any known operational problems.
(Lock-up, computer crash, printer problems or any other technical problems).

______________________________
Software/Hardware Approval or Denial

[ ] Approved [ ] Denied  Signature ____________________________

[ ] Approved [ ] Denied  Signature ____________________________

[ ] Approved [ ] Denied  Signature ____________________________

If approval is denied, please meet with your building principal to begin the appeal process.