

**Saint Louis University**

**Technology Purchase**

**Request Form**

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| **Department: Date:**  |
| **Requestor:** **Phone: Email:**  |
| **Type of Request (circle one)** **New Upgrade Replacement****Type of Equipment being replaced:**  |
| **Equipment Requested (include description, specifications, necessary system software and estimated cost. Attach any bid information that supports the estimate.)** |
| **Primary Use:**  |
| **Justification: (Please include information about how the technology is to be used and by whom. If you requesting high-end specifications or equipment, be very explicit about the function that requires justifies the cost.)** |
| **Proposed location:**  |
| **Name of individual using the equipment:**  |
| **Address specific computer questions: Dwayne Jackson at 314-977-3566** |
| **Department Head Signature:** **Date:**  |
| **Final Approval:****Date:** |