



Technology Services Department

Hardware, Software & AV Request

Please complete form and route to your divisional office to be attached to the workday requisition. All red fields are required.

REQUESTED BY

DEPARTMENT/ DIVISION

LOCATION/ ROOM#

PHONE

DATE

DESCRIBE ITEMS(S) - USE ADDITIONAL FORMS FOR NON-RELATED ITEMS

QUANTITY

DESCRIPTION

UNIT COST

(If you need assistance, call the Help Desk at 246-6666)

VENDOR INFORMATION

EQUIPMENT TYPE

PC
MAC
Other

NAME:

EQUIPMENT END
USER:

STREET:

ROOM NUMBER
OF EQUIPMENT:

CITY/STATE/
ZIP:

WILL YOU INSTALL
ITEMS?

YES
NO

PHONE:

MATC INVENTORY # OF
EXISTING EQUIPMENT:

WEBSITE