



Req Date	
Req#	

For requests that fall outside of standard offerings below, please complete the Specialized Equipment Request Form.

Name		Purpose	<input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> Lab
Email		Department	
Bldg/Room		Manager	
Phone		Mgr Email	

Desktops, Monitors, Laptops, & Tablets

Note: Desktop configurations include mouse and keyboard

	Brand & Model	Qty
1		
2		
3		
4		
5		

Accessories & Software

Accessories (i.e. laptop bags, USB hubs, secondary battery, etc.)	
Specialized Software	

When requesting specialized/extra software which has to be migrated/re-installed or new purchases (i.e. lab, classroom), DIT must ensure the licensing is validated. It is unlawful to install software on multiple desktops if only one license is purchased.

Delivery

Deliver to a different location?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Giving old system to someone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes" for either question above, please specify the recipient's name, extension, email and location.			

Please send an email to assetmanagement@bowiestate.edu to notify them of any equipment transfer to ensure that the old equipment will be reassigned appropriately.

Approval

Manager's Signature		Date	
Budget Account	<input type="checkbox"/> State <input type="checkbox"/> Title III <input type="checkbox"/> Grant	Dept ID	

DIT Approval Signature		Date	
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