

Request for Additional Technical Resources

Name _____

Phone number: _____

Email address: _____

1. Describe the business, research or scholarly need for a second computer device using university funds.
2. Do you have large datasets that you are using with the statistical software? How large are those datasets?
3. What are your research or scholarship storage needs? Do you have research data or a single file larger than one gigabyte? (Email does not count.)
4. Is this computer device a specific requirement of a grant? Yes____ No____
5. What is the make and model number of your current computer?

Employee Certification

I certify that the description of my computing requirements to meet University business, research or scholarly needs is accurate. I have read and agree to the Employee Responsibilities as stated in the Mobile Communications Guidelines document. I understand that I may be subject to personal tax liability resulting from this purchase.

Employee Signature: _____

Date: _____

Administrative Approval

Associate Dean of Academic Affairs: Faculty and Research: _____

Date: _____

Associate Dean of Information Systems: _____

Date: _____

Associate Dean of Finance: _____

Date: _____