*Please attach all quotes and sources of pricing with this proposal. Attach additional sheets if necessary.*

**Section 1 – Requestor(s) Information**

Date:

Contact Person:

Department: Phone:

**Section 2 – Background Information on the Request**

What is the purpose of the request? (15 points)

Is this for accreditation purposes?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

If yes, submit documentation from accreditation team with statement of technology requirements and accreditation timetable. (5 points)

Which students and how many will be affected by the request fulfillment? (classes, majors, colleges, etc.) (15 points)

Have any attempts been made to fund this project from a grant or from private sector sources as a joint effort? Do not include previous Tech Fee proposals or other grants written for other equipment.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

If yes, list the date attempted, title of grant as specified to the Controller’s Office, funding agency, status, amount requested, and if funding for this grant is a University match. (5 points)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** | **Title of Grant** | **Funding Agency** | **Status** | **$ Requested** | **Match (Y/N)** |
|  |  |  |  |  |  |
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How will equipment be maintained? Provide in writing some commitment from the University for non-computer equipment. (no points required question)

Has a network infrastructure impact been assessed? Did you show the proposal to the Network Administrator ([slade.besson@nicholls.edu](mailto:slade.besson@nicholls.edu))? (required answer – no points)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Will there be any remodeling/demolition of existing facilities to fulfill this request?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

If yes, please briefly elaborate. (required answer – no points)

What is the plan for the disposition of the replaced equipment? List equipment including model numbers. (required answer – no points)

**Section 3 – Budget Information**

***Equipment (individual items $1,000 and over)***

|  |  |  |  |
| --- | --- | --- | --- |
| Item Description | Quantity | Cost per Unit | Total |
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|  |  |  |  |
|  |  |  |  |
| TOTAL of Equipment | | |  |

***Software***

|  |  |  |  |
| --- | --- | --- | --- |
| Item Description | Quantity | Cost per Unit | Total |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| TOTAL of Software | | |  |

***Supplies (individual items less than $1,000)***

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| --- | --- | --- | --- |
| Item Description | Quantity | Cost per Unit | Total |
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| TOTAL of Supplies | | |  |

***Installation***

|  |  |  |  |
| --- | --- | --- | --- |
| Item Description | Quantity | Cost per Unit | Total |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| TOTAL of Installation | | |  |

***Personnel Training***

|  |  |  |  |
| --- | --- | --- | --- |
| Item Description | Quantity | Cost per Unit | Total |
|  |  |  |  |
|  |  |  |  |
| TOTAL of Personnel Training | | |  |

|  |  |
| --- | --- |
| **Total Requested** |  |