

Tablet Computing Device Purchase Approval

Please submit the following information along with your purchase request documentation.

1. Name, Department and Contact Information of Employee Requesting Device:
2. Device Description (brand/type):
3. Primary Academic/Business Purpose:
4. Rationale for need:
5. If requesting 3G/4G service on University funds, provide details of need:
6. If requesting software purchases on University funds, provide details of need:
7. Employee certifies information is complete and accurate (Name/Signature or e-signature*):
8. Unit Dean/Vice President certifies review and approval (Name/Signature or e-signature*):

*** Please note that “e-signatures” are simply email messages forwarded from each users account.**