Technology Purchase Exception Request Form

(Please use File, Download As to save a version that can be edited; complete form, have user and department head sign, then attach to requisition quote)

Employee Information				
Date:	Department:		Employee Name:	
Job Title:		Cam	pus Phone #:	Cell Phone #:
Brand:				
Justification	(Dlagge cumlain subs. Haireaugita D	la li au at	and audited Stansform canion	eartia not accontable
Justification (Please explain why University Policy standardized Storefront equipment is not acceptable.)				
Funding Source Is this Grant funded?YESNO				
<u>Account</u>	<u>Fund</u> <u>DeptID</u> <u>F</u>	<u>Progra</u>	<u>m Class Pi</u>	<u>roject</u>
Annessala				
Approvals				
<u>User Signature:</u>				
			Signature	Date
Printed Name			o.gara.	
Department Approval:				
			Signature	Date
Printed name		Signature	Date	
Technology Services Review:				
Printed Name			Signature	Date
Vice President/Provost Approval:				
Printed Name			a	
Printed Name		Signature	Date	