

SUFFIELD PUBLIC SCHOOLS 2020-2021 CURRICULUM/TECHNOLOGY REQUEST

NEW REQUEST: <input type="checkbox"/> Yes <input type="checkbox"/> No		RENEWAL/UPGRADE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SCHOOL NAME:		DATE:	
INSTRUCTIONAL PURPOSE ONLY			
<input type="checkbox"/> SOFTWARE <input type="checkbox"/> HARDWARE <input type="checkbox"/> DEVICE APP <input type="checkbox"/> DIGITAL RESOURCE			
Identify Person (s), subject area, or department REQUESTING			
REQUEST DETAILS (To be filled out by teacher)			
Educational Justification:			
<ul style="list-style-type: none"> ○ How does this connect to the curriculum? ○ When/how often and what structures will the students use this resource? ○ How will you track the use and evaluate the use? 			
Student Use: <input type="checkbox"/> Yes <input type="checkbox"/> No		Teacher Use: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Data Privacy (will student identifiable information be used?) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Qty Requested:	Total Fee:	Per License: \$	<input type="checkbox"/> Free
ADMINISTRATIVE APPROVAL			
Request Reviewed by Curriculum Coaches: <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
Request Reviewed by School Admin: <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
Request Reviewed by Special Education Supervisor *If related to IEP <input type="checkbox"/> Yes <input type="checkbox"/> No			
Approved by Assistant Superintendent of Curriculum <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
BUDGET ACCOUNT NUMBER:			
TECHNOLOGY REVIEW (FILLED OUT BY TECHNOLOGY DIRECTOR)			
TECHNOLOGY COMPLIANCE:			
Privacy ACT Compliance: <input type="checkbox"/> Yes <input type="checkbox"/> No			
TECHNOLOGY SPECIAL INSTRUCTIONS			
Special Instructions:			
Order Date:	Total Amount:	PO Number:	