

# Technology/Computer Request Form

Shiner ISD

## Section I

(Section I of this form is to be completed and submitted to the campus Principal / supervisor for approval.)

\_\_\_\_\_  
Employee submitting request

\_\_\_\_\_  
Date

Location of needed work/repair: \_\_\_\_\_  
\_\_\_\_\_

Description of needed work/repair: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Section II

Priority (1-5): \_\_\_\_\_ (1 = Emergency, 5 = not critical)

**PRIORITY: Immediately** \_\_\_\_\_ **Within 2-3 Days** \_\_\_\_\_ **Date due by:** \_\_\_\_\_

Routine: \_\_\_\_\_ Next Summer: \_\_\_\_\_

If emergency, what is the nature of the emergency: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Principal / Supervisor

\_\_\_\_\_  
Date

## Section III

(To be completed by the Technology Coordinator)

Date Received: \_\_\_\_\_

Assessment of the problem: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated time to complete: \_\_\_\_\_ Estimated expense to complete: \_\_\_\_\_

List of materials needed: \_\_\_\_\_  
\_\_\_\_\_

Recommendation of not completed: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date completed

\_\_\_\_\_  
Date referred back if not completed

\_\_\_\_\_  
Signature of Technology Coordinator

08/26/2010