UNIVERSITY OF PENNSYLVANIA

# SCHOOL/CENTER IT AND/OR EQUIPMENT CAPITAL NEEDS STATEMENT

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| Schools and Centers making an IT and/or Equipment purchase must complete this form and obtain approval from the Dean, Vice President, Vice Provost or Resource Center Director as appropriate. If the potential cost (item “b” below) of the request is ≥ $500K or the purchase requires an Internal Capital Loan, this request must also be approved by the Provost or Executive Vice President, as appropriate, and included in a document package for approval by the CITE committee . A School/Center should not proceed with the purchase until it receives all necessary approvals. |

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| **Proposed Equipment Purchase:** |  |

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| **School/Center Name:** |  |

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| **Department:** |  |

**Justification:** (Use additional pages if necessary)

1. Describe in detail the IT or equipment purchase your School/Center has identified and how this purchase will further the goals of your School/Center and any affected program(s). Attach all relevant studies, reports and analyses that may clarify and document the programmatic/IT and/or equipment issues you describe. To the maximum extent possible, use quantifiable information in your description.

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1. What is your estimate of the cost of the purchase described above and what is the source of funds?

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1. What is the estimate based on? For example, provide vendor quotations, industry standard comparison, previous or current study, or other methods of expertise.

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| **Which of the following best describes the IT or equipment purchase your School/Center has identified?** (Check more than one if appropriate) |
|  |  | Outdated software. |
|  |  | Outdated hardware. |
|  |  | Upgrade to existing software |
|  |  | Upgrade to existing hardware |
|  |  | New equipment |
|  |  | Equipment upgrade |
|  |  | Other (see description above). |

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| **Name of Person Completing This Form:** |  | **Date:** |  |
| **Title:** |  | **Phone No.** |  | **E-mail:** |  |
|  | Please submit this form to the Dean, Vice President, Vice Provost or Resource Center Director, as appropriate, for approval. |

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| “b” < $500K  | Please return the completed and signed form to the Office of the Vice President for ISC or the appropriate Department Head |
| “b” ≥ $500K or ≥ $100K w/ loan | Please return the completed and signed form to either the Provost or the Executive Vice President as appropriate and include in your CITE submittal to the Associate Director of Budget & Capital Planning at FRES. |
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| **Approved:** |  | **Date:** |  |
|  | Dean, Vice President, Vice Provost, Resource Center Director (for all requests) |  |  |

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| **Approved:** |  | **Date:** |  |
|  | Provost or Executive Vice President (for requests when “b” above is ≥ $500K) |  |  |
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