

TECHNOLOGY PURCHASE REQUEST (TPR)

All requests for technology purchases require completion of a TPR. Completed forms should be submitted to MDENET@mdek12.org with the subject line "Technology Request Form - (name of product/services)"

SBE Approval

ITS Approval

For OTSS Use Only

TECHNOLOGY PURCHASE INFORMATION
(To be Completed by Requesting Program Office)

Name of Product/Services:		Date:	
Requestor Name:		Requestor Title:	
Requesting Office:		Phone No:	

Technology Type: Hardware Software Maintenance IT Professional Services

Type of Request: New Replacement Renewal

Project Description: Provide a brief description and quantity of the product(s) or service(s) needed.

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Justification: Provide detailed information to justify the purchase request. Include information about how the product(s) or service(s) will be used and who will be using them.

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FOR SOFTWARE PURCHASE ONLY
(To be Completed by Requesting Program Office, if applicable)

For renewals, provide amount spent to date and attach prior year's documentation.		Will software access student-level data?	
Named User(s):		Term: (start/end dates)	

FUNDING DETAILS: BUDGET CODES
(To be Completed by Requesting Program Office)

Budget Year:		Fund:	
Cost-Center:		Internal Order:	

I certify that the budget codes provided above have adequate budget authority available for this purchase.

Funds Certification Signature: _____ **Date:** _____

PROGRAM OFFICE APPROVAL

I have reviewed this technology purchase request and have determined that these products and/or services are needed.

Program Director Signature: _____ **Date:** _____

Office of Technology & Strategic Services

INFORMATION TECHNOLOGY WORK GROUP DETERMINATION (To be Completed by OTSS)

Member Signature: _____ Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Member Signature: _____ Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Member Signature: _____ Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Member Signature: _____ Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
IT Project Manager Signature: _____ Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Reference MDENET Ticket Number: _____

If ITWG disapproved, briefly explain why. _____

The quorum necessary to provide approval/disapproval shall be three and must include at least two committee members and the IT Project Manager.

REVIEW (To be Completed by OTSS)

The following documents have been reviewed (check all that apply).

TPR
 Request for Quotes (RFQ) Form
 Vendor Quote(s)
 ITS Documentation (Procurement Request Form, CP-1, Contract, ITS Board Approval)
 Other _____

I have reviewed the above documents and have determined that the vendor quotes received meet the specifications of the TPR and RFQ and should be routed to the IT Director for approval.

IT Project Manager Signature: _____ **Date:** _____

APPROVAL (To be Completed by OTSS)

For IT purchases that require a signed technology agreement, if applicable, the Program Office will include in their packet the following items in addition to all other documents provided/approved by OTSS (check all that apply).

Contract Justification Form
 Vendor Agreement (unexecuted)
 Other _____

I have reviewed the technology procurement request and have determined that the request complies with the MDE operating procedures for IT related products and services and should be routed to the Office of Procurement for processing.

IT Director Signature: _____ **Date:** _____

For end-of-budget-year requests, please submit TPR to mdenet@mdek12.org no later than the first week of May to allow OTSS staff adequate time to ensure the agency complies with the year-end processing regulations imposed by state statutes and the Department of Finance and Administration.