Date Received: _____ (by IT)

Information Technology Investment Request From

Select One:	Technology Upgrade	New Project	Existing Project	Software
Name of Requeste	er:		Phone:	
Department Nam	e:		Email:	
Project Name:			Timeframe:	
Director Approval	: (Check to	indicate approval;	copy director on su	ubmission)

1. Problem Statement: (In 25 words or less, describe the root cause of the problem, not the solution)

2. Indicate with an **X** which **documents** you are attaching to support your request. You may select multiple boxes.

Technology Specifications (required for	IT Itemized Budget (required for all
all non-standard technology requests)	requests)
Business Requirement Statement or	Project Charter or PMP (required for
Business Case (required for all new	<u>all ongoing projects</u> – can be a URL
projects, initiatives, and/or IT	link or accessible file server path
contracts)	name)
Other (describe)	

3. Strategic Plan Deliverable Category (Program Element):

4. Business Justification:

5. If there is a **mandate or directive**, cite the reference. If none, indicate N/A.

6. If there is a **specific time/date constraint,** describe below. If none, indicate N/A.

7. A. If there is comparable **technology in use** or being proposed at the District, indicate below where is it being used and by whom? If not, indicate N//A.

B. Are there lessons learned available from the comparable technology?

Yes No Not Sure. Please attach if available.

8. Indicate with an **X** which **services** this request will require (can be several).

	Procurement	Development	Implementation	Training & Support
Off-the-Shelf Software				
Customer Software				
Desktop Software/OS				
Hardware				
Networking				
Disk Storage				
Telecommunications				
Data				
IT Contractual Services				
Web Services				
Other (Specify)				
Other (Specify)				

9. Indicate **cost** estimate and specific **funding source** in the table below:

IT Budget Items (list each item separately)

	CONSULTING SERVICES						
	Description	Account Code	Qty	Unit Cost	Total Cost		
	Professional Services						
1							
2							
3							
4							
	Total Consulting						

	EQUIPMENT & MATERIAAL RESOURCE NEEDS					
	Computer Software					
1						
2						
3						
	Computer Software Maintenance					
1						
2						
3						
	Computer Hardware					
1						
2						
3						
	Computer Hardware Maintenance					
1						
2						
3						
	Computer Parts & Supplies					
1						
2						
	TOTAL EQUIPMENT & MATERIALS					
	GRAN TOTAL OF REQUEST					

10. Does this request require ECOS (Enterprise Cloud Oversight Services) Approval?

Yes No

11. Indicate with an **X** the project size (*to be completed by IT*):

Check Box	Project Size	Project Duration	Condition	Project Cost
	Small Projects	<90 days	AND	<\$150,000
	Medium Projects	>=90 days and <1 Year	AND	<\$150,000
	Large Projects	>=1 Year and <2 Years	OR	>=\$150,000 and <\$1,000,000
	Major Projects	>=2Years	OR	>=\$1,000,000

IT Review and Approvals

Technical Review Team Findings:

Application Manager	Date	Approve	Yes	No
Enterprise Services Manager	Date	Approve	Yes	No
Network Manager	Date	Approve	Yes	No
IT Security	Date	Approve	Yes	No
Director of PMO	Date	Approve	Yes	No
Chief Information Officer	Date	Approve	Yes	No