

Black River Falls School District

Instructional Technology Form Directions

About this Form

This form was generated to create a standard process for the acquisition of instructional hardware and software. It will improve communication to all constituents impacted by this acquisition.

When Do I Need to Complete this Form?

This form is to be completed **ANYTIME** a staff member is interested in acquiring any instructional technology hardware or software. It needs to be completed **prior** to any purchase order, donation, or grant submission!

Please consult with the Technology Director (Peggy Gordon) regarding the items(s) you are seeking to assure that they are compatible with our current technology.

Who Should I Call if I Have Questions?

Any questions about the form or the process should be directed to the Technology Steering Committee. Those members include: Director of Curriculum & Instruction, Director of Business Services, Technology Supervisor and High School Principal.

What Happens After I Submit the Form to My Administrator?

Your administrator will review the form and sign it for approval. The administrator will then send the form to the Director of Technology who review it and will bring it to the Technology Steering Committee to review. The committee will decide if the request is approved or not and communicate the decision back to the building principal.

Helpful Hints When Completing the Form

- Complete the contact information section so that the committee has someone to contact with any questions.
- If this is a product that already exists in the district (such as a computer, printer, digital camera, etc.), you can leave the description blank.
- If you are requesting a new product or software to the district and need assistance in selecting the best product or vendor to meet your needs, involve the Technology Integration Coach and Technology Supervisor in your decision making process.
- The *Impact of Student Learning* and *Staff Development* sections are critical components of this form. Be sure to provide good, sufficient rationale.

Please fill out the form on the next page



Black River Falls School District – Instructional Technology Request

CONTACT INFORMATION

Name: _____ Date: _____ Additional requestor(s): _____

Building and grade level: _____

INSTRUCTIONAL TECHNOLOGY

Type of item: _____ Quantity: _____

Description (Brand, Model#, Version, etc.): _____

Where will it be used? Individual classroom Grade level Department Building District

Locations to be installed (building, room#, workstation#): _____

Installation costs: _____ Budget: District Building Other _____

Continuing hardware costs (replacement cost, bulbs, etc.): _____

SOFTWARE ONLY

Number of licenses needed: _____ License options available: _____

Type of License: Individual @ \$ _____ Lab Pack _____ @ \$ _____ Site _____ @ \$ _____

New to the district Upgrade to a new version of an existing license Additional licenses of existing software

VENDOR INFORMATION

Vendor Quote#: _____ *Please attach quote if you have it*

Name of vendor: _____ Contact: _____

Address: _____ Phone: _____

Email address: _____ Website: _____

IMPACT ON STUDENT LEARNING

How does this hardware/software fit into the district-approved curriculum?

How will this hardware/software be used to improve student learning?

How will you assess that this tool has impacted student learning?

STAFF DEVELOPMENT

- What training is needed to implement this hardware/software? _____
- When and how will training be accomplished? _____
- Associated costs? _____
- Is training available from the vendor? Yes No Associated cost? _____

Administrator Approval: _____ Date: _____ Account #: _____

Technology Director Approval: _____ Date: _____

FOR COMMITTEE USE ONLY

Approved

Not approved

Need more information

Technology Steering Committee Approval: _____ Date: _____