



# New Work Station Purchase Request Form

Employee Name or Position: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Date Needed By: \_\_\_\_\_

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### Computer Specifications:

**CPU:**       Tower       Desk Top       Lap Top       Docking Station

**Monitor:**       22"       24"       26"       28"

**Comment/Question:** \_\_\_\_\_

**Front USB Ports:**       4       6

**Mouse and Keyboard:**       Standard       Other \_\_\_\_\_

**Speakers:**       On Board       On Monitor       Stand Alone

**Printer:**       Yes       No       DeskJet       Laser

Regular       Copy       Scan       Color       All

**Any special software:**       Yes       No

Specify software \_\_\_\_\_

**Email:**       Yes       No      Current SIT email: \_\_\_\_\_

**Battery Backup:**       Yes       No

**Other equipment needed / Comments: (Phones, etc.)**

**If out of stock is it okay to order a different model?**       Yes       No

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P.O. #: \_\_\_\_\_ Field Order # if \$500 less: \_\_\_\_\_

Requested By: \_\_\_\_\_