#### JHCEHSHS STUDENT TECHNOLOGY FEE REQUEST FORM

Procedure for Submission: Form Updated: 12/10/12

- 1. Submitter must obtain all required information from the desired vendor(s). An official quote from the vendor must be attached.
- 2. Only one request per Request Form. This request must be reviewed, approved, and submitted by the requesting program's Department Chair.

3. The Dept. Chair may email this request to the Tech Fee Director. Since some departments will have multiple requests, please rename request in the following format: Dept # (rank. 1 being the highest priority) and a brief title

1	Depts. of Kinesiology-Health & Recreation Professions		Requesting Faculty:	Dr. Barry Scheuermann	Date Submitted:	02/07/2013
	MPORTANT: Attach an of					

List one item OR group (for use as a "package") per page.

Vendor info. (name, address, Web site

Item Name	URL, phone #, email, etc.)	Part or Model #	Cost (ea	ch)	Qty	Total
Precor 932i Experience	Direct Fitness Solutions		\$ 3,195.00		4	\$12,780
Treadmill Precor 536i Experience Elliptica	MICHIGAN OFFICE: 248-755-5748		\$ 3,795.00		2	\$7,590
Precor RBK815 Recumbent Bike	248-344-1312 fax		\$ 2,150.00		2	\$4.300
Course(s) where item(s) will be used KINE 3530;	3830; 4210; 4830; 4850; 4910; 4940	Expected life of product (years		# Stud Impacted		150
software will be used/stored	Iulipurpose room	Will Tech Fee funds k annual renewals or m		NO		

#### Provide a brief description of the technology requested\*:

We are requesting funding for 4 treadmills, 2 elliptical exercisers and 2 exercise bikes.

### Briefly describe how the technology will be used (function)\*:

The equipment will be used to equip students to conduct fitness testing and fitness programming in the new College of Health Sciences Wellness Promotion and Research Center that will be located in the Health and Human Services Building at the University of Toledo. The Center will serve as a "one stop shop" for a variety of services related to wellness and fitness that will be provided to the university and surrounding community. This equipment will be used to assess fitness levels provide programming for students, staff, faculty, and members of the community. This equipment will provide students with the opportunity to actively engage with healthy and patient populations as they learn how to manage a facility, provide a variety of exercise/fitness tests as well as develop exercise/fitness programs for these "clients".

#### Provide a rationale that Tech Fee funds are appropriate for this request\*:

This new interdisciplinary Wellness Promotion and Research Center, which with be located in HS 1100 and in HH 1711A will be entirely staffed by students to gain hands on experience which will directly translate to improved marketability in a very competitive field. This equipment will provide students with the opportunity to actively engage both healthy and patient populations as they learn how to manage a facility, provide a variety of exercise/fitness tests as well as develop exercise/fitness programs for these "clients". Additionally, students will provide education as they interact with clients and patients as they monitor their progress. One of the overall goals of this center and the need for this equipment, is to establish an educational learning laboratory where faculty and students interact in an academic setting outside of the traditional classroom while providing students with the opportunity to develop and practice their skills in a environment that promotes health, wellness and fitness across the campus and surrounding community.

\*Keep in mind that the committee members come from a variety of educational backgrounds and may not be familiar with department specific language. Please use concise, common terminology so that committee members reviewing this form will be able to fully understand the request.

• If you are submitting a request for computers, printers, scanners or software, you <u>must</u> consult with College Computing and the technology staff, to acquire a quote and to make sure that this equipment/software is supported by UT and compatible with existing technology.



# MICHIGAN OFFICE: 248-755-5748 248-344-1312 fax

## EQUIPMENT PROPOSAL Page 1 of 1

Date 1/25/2013 Salesman Mark Kwiatkowski Proposal # 012513F
P.O. # (please attach) Invoice #
Ship Via DFS Terms NET DUE

Quoted/Sold to: Ship to: NOTES:

University of Toledo University of Toledo

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Toledo, OH Toledo, OH

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			Unit	Unit		Extended	
Description		Qty	List Price	Price Discount Price		Discount Price	
Fitness Equipment							
Precor 932i Experience Treadmill	4	4	\$ 4,895.00	\$	3,195.00	\$	12,780.00
Precor 536i Experience Elliptical	2	2	\$ 5,695.00	\$	3,795.00	\$	7,590.00
Precor RBK815 Recumbent Bike	2	2	\$ 3,395.00	\$	2,150.00	\$	4,300.00
						\$	-
Acceptance of Proposal: These prices, specifications and conditions			<b>Equipment T</b>	otal		\$	24,670.00
are satisfactory and are hereby accepted. You are authorized to order			Freight			\$	1,500.00
the equipment listed with payment to be made as outlined below.			Delivery & In	stall		\$	750.00
Authorized Signature:			Sub-Total			\$	26,920.00
print name			Sales Tax				
P.O. Number:			Total			\$	26,920.00

#### **Standard Terms and Conditions:**

Date of Acceptance: \_

- 1. 50% deposit and approved P.O. # with order and balance due at delivery.
- 2. These prices are good for thirty (30) days from the above date.
- 5. Unless the product is defective or the return is a direct result of a Direct Fitness Solutions error, there is a 10% restocking fee for all orders and a 20% restocking fee on all customer orders. In addition, all shipping costs are non-refundable.



TOTAL RETAIL COST

In-Service Training Included