STUDENT TECHNOLOGY FEE REQUEST FORM

Procedure for Submission Form Updated 9/05/17

1 Submitter must obtain required information from vendor(s) An official quote from the vendor must be attached. No website screen shots

2 This request must be reviewed, approved, and submitted by the requesting program's School Chair

The School Chair may email this request to the Tech Fee Director Since some schools will have multiple requests, please rename request PDF files in the following format. Schoolname# (rank, 1 being the highest priority) example - Social Justice1. Social Justice2, etc., Please submit as one PDF files

in the following format	Scnooiname# (гапк,	7 D	eing the nighest priority) (exampie - Sociai	Justice 1, SocialJustice	e∠, e	tc <u>Piease submit</u>	t as one PDP file
Dept making request	Intervention & Wellness		Requesting Faculty:	Jennifer L.	Reynolds	D:	ate Submitted:	10/18/2017
	ANTE ALESS OF	5	many and emond	inevenior				

Item Name Watchminder3-Reminder tool Taxes		Vendor info. (name, address, Web site URL, phone #, email, etc.)		Part or Model #		Cost (each)		Qty	Total
		School Specialty PO Box 1579 Appleton, WI 54912-1579	1581211	61 09 0			5	305.45	
Shipping		888-388-3224			0				
Course(s) where item(s) will be used	SPSY 50	060; SPSY 7330; SPSY 7940	, , , , , , , , , , , , , , , , , , ,	Expected life product (year	rs)	10		dents per Year	36
Location equipment software will be used		Materials room: 3100J		ech Fee needed fo tenance? What is th			n/a		
The watch uses a vpsychologists to co	ribration ale nduct systematics the technol	e technology requested*: erty training and reminder system It ematic direct observations. ogy will be used (function)*:							
		aduate students in the schools to con -risk, or identified with, a disability	iduct cla	assroom obser	vatio	ons and to	design ar	nd implen	nent behav

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

This is an innovative device that is considered technology in our field and will allow our students to complete tasks efficiently and accurately

*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



Send Orders & Correspondence to SCHOOL SPECIALTY PO BOX 1579 APPLETON WI 54912-1579

Corporate FID# 39-0971239

Quote

Quote Number 7785643734 (Ver 1)
Quote Effective Date 18-Oct-2017
Quote Expiration Date 31-Dec-2017
Customer Number 259336
PO Number

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Currency USD

Ship To

UNIVERSITY OF TOLEDO 2801 W BANCROFT ST TOLEDO OH 43606-3390

Bill To

UNIVERSITY OF TOLEDO 2801 W BANCROFT ST GILLHAM HALL 2000G TOLEDO OH 43606-3390

Quantity	UOM	Quoted Item	Our Item (if different)	Description	Unit Price	Net Price	Extended Price
The following	g itei	m(s) will ship to	: UNIVERSIT\ 2801 W BAN TOLEDO OF	OF TOLEDO CROFT ST 4 43606-3390 REYNOLDS,JENNIFER			
5	EA	1581211	1581211	WATCHMINDERS-REMINDER TOOL	93 99 Si	61 09 Taxes: nipping/Handling Total	305 45 \$0.00 \$0 00 \$305 45

10/18/2017 9 05 28 AM LEE XENG SSI_QUOTE / 16 MAY-A 081-810 01