

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.
3. 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 - SocialJustice1, SocialJustice2, etc. Please submit as one PDF file*

| | | | | | |
|---|--|---------------------|--|-----------------|--|
| Dept. making request: | | Requesting Faculty: | | Date Submitted: | |
| IMPORTANT: Attach an official quote from the vendor. | | | | | |

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

| Item Name | Vendor info. (name, address, Web site URL, phone #, email, etc.) | Part or Model # | Cost (each) | Qty | Total |
|--|--|--|-------------|------------------------------|-------|
| | | | | | |
| Course(s) where item(s) will be used | | Expected life of product (years) | | # Students Impacted per Year | |
| Location equipment or software will be used/stored | | Will Tech Fee needed for annual renewal or maintenance? What is the annual cost? | | | |
| Provide a brief description of the technology requested*: | | | | | |
| Briefly describe how the technology will be used (function)*: | | | | | |
| Provide a rationale that Tech Fee funds are appropriate for this request*: | | | | | |

***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 must 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.

415 Lawrence Bell Drive, Unit 4
 Buffalo, NY 14221
 Tel: (716) 276-3040
 Fax: (716) 276-3043
 Email:
info-us@CasellaSolutions.com
 Web: www.CasellaSolutions.com



QUOTE

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 Toledo, OH 43614
 U.S.A.
 Phone: (419)383-5341
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QUOTATION NO: CASQ5082
 QUOTE DATE: 10/16/2017

| QTY | MODEL | DESCRIPTION | UNIT PRICE | EXTENDED PRICE |
|-----|-----------|--|-------------------------|----------------|
| 1 | CEL-120/2 | Acoustic calibrator, Class 2, 114 dB at 1 kHz, with (2) AAA batteries and Calibration Card, for use with CEL-63X Series sound level meters | \$380.00 | \$380.00 |
| | | | SUBTOTAL | \$380.00 |
| | | | SALES TAX (TBD) | \$0.00 |
| | | | SHIPPING (FOB S.P. TBD) | \$0.00 |
| | | | TOTAL | \$380.00 |

| YOUR AREA SALES MANAGER | TO PLACE ORDER CONTACT | PAYMENT TERMS |
|---|---|-------------------------|
| Neil Brady Buffalo, NY 716-276-3040 Neil.Brady@CasellaSolutions.com | Sales Department Toll-free: (800) 366-2966 Phone: (716) 276-3040 Fax: (716) 276-3043 Info-us@CasellaSolutions.com | Prepaid or Setup Net 30 |

PRICES ARE VALID FOR 30 DAYS. PRICES BASED UPON TOTAL PURCHASE. CASELLA INSTRUMENTS PROPOSED ABOVE ARE COVERED BY A LIMITED TWO YEAR (24-MONTH) WARRANTY, COVERING PARTS AND LABOR ON A RETURN TO CASELLA BASIS. WE SPECIFICALLY DISCLAIM ANY AND ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO ANY IMPLIED WARRANTIES OR WITH REGARD TO ANY LICENSED PRODUCTS FROM THIRD PARTIES NOT OF OUR OWN MANUFACTURE. WE SHALL NOT BE LIABLE FOR ANY LOSS OF PROFITS, BUSINESS, GOODWILL, DATA, INTERRUPTION OF BUSINESS, NOR FOR INCIDENTAL OR CONSEQUENTIAL MERCHANTABILITY OR FITNESS OF PURPOSE, DAMAGES RELATED TO THIS AGREEMENT. WE RESERVE THE RIGHT TO CHARGE A MINIMUM 15% RESTOCKING FEE WITH ORIGINAL PACKAGING.