

CSISD Technological Equipment Disbursement Request Form 2021-2022

Department/Campus Name:		Date:	
Requested by (Signature Required):		Approved by Director/Principal (Signature Required):	
Total Amount of Request:		IMA Approved by:	

Disbursement Category (select one): Calculators Desktop eBook Reader Equipment Support
 Learning Lab Laptop Mobile Devices Response System Shipping Costs Supplies & Materials
 Tablet Whiteboard Workstation

Product Description:				# of Students Served:	
# of Administrators Served:		Manufacturer:		Assistive Technology: (Yes or No)	
Primary Use: (All Subjects, ELPS/ELL, English, Enrichment Subject, Mathematics, Science, Social Studies)				Grade:	
Quantity:		Unit Price:		Extended Price:	