2023-24 Technology Request Form

For Annual Planning/Program Review Requests AND Off-Cycle Requests

Welcome to the Cuyamaca College Technology Request Form!

Annual planning/program review requests are reviewed and prioritized in the Spring. Anything outside that time frame can be submitted for Off-Cycle consideration and must be submitted via a different form. Please submit one form per request. Complete the entire form thoroughly and answer all questions with specific details. Note that it is not necessary to request replacements for classroom computers, software, or office computers. These will be updated as part of the 5-year replacement cycle. For technology support, please contact the Help Desk at chelpdesk@gcccd.edu.

- For assistance with quotes, please email Camillo Hernandez (camillo_hernandez@gcccd.edu). Let him know you need an estimate/quote for program review and allow 2 weeks.
- If you already have a funding source identified, you still need to submit a request for purposes of inventory, sustainability and support.
- Please keep in mind when filling out this form that extra consideration is given to proposals that demonstrate support of learning outcomes or benefits to multiple departments/programs.

| * 1. Technology | Plan Year | |
|-----------------------------------|---|-----------|
| * 2. Title of Reques | st | _ |
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| * 3. Location of Re | quest | |
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| * 4. Department | | 7 |
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| * 5. Contact Person | n | |
| Name | | |
| Email Address | | |
| * 6. Description | | |
| Please provide a brocore goal(s). | rief description of the technology/software or technology project | t and its |
| | | |

Proposal Justification

A. College and District Strategic Plan

* 1. Please explain how the technology or enhancement supports the strategic plan and impacts students, employees, the college, and/or the district. Which Strategic Plan priority (or priorities) are supported by this request? To access the Strategic Plan, please click here. Increase equitable access (enrollment) Eliminate equity gaps in course success (passing grade in class) Increase persistence eliminate equity gaps (re-enrolling the subsequent semester or year) Increase completion and eliminate equity gaps (graduating with a degree/certificate, or transferring) Increase hiring and retention of diverse employees to reflect the students and communities we serve Other (please specify) * 2. How does the request support the above priorities? * 3. Who would this impact? Please select all that apply. Students Employees College District Other (please specify) * 4. What is the number of students or employees impacted per semester? * 5. How would this impact the above group(s)?

B. Statewide Initiatives/Mandates

| * 6. Does the technology support a state-wide initiative or is it a legal mandate or in support |
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| of a legal mandate? |
| Yes |
| ○ No |
| 7. If yes, please explain how the technology supports a state-wide initiative or is it a legal mandate or in support of a legal mandate? |
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| C. Criticality/Urgency |
| *8. Please be aware that projects, once approved, are typically scheduled 6 months to a year in advance. Consider the consequences if the technology/software is not implemented, upgraded or renewed. |
| What are the consequences if the technology/software is not implemented/upgraded, or renewed? Examples: Security concerns, loss of FTES, mandates, accreditation, etc. |
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| * 9. What is your preferred time for implementation? |
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| D. Supporting Data |
| 10. Tell us how the data you have supports the implementation of the technology. This can be qualitative or quantitative in the form of surveys, observations, SLO or other assessment |
| data, institutional research data or other reports and data. |
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| | 5 - Critical need in |
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| | support of current |
| 1 - Preferred, but not | curriculum and services |
| critical in support of current curriculum and | (Cannot deliver curriculum or services |
| services | without it) |
| | William III |
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| 12. Please attach any supporting data/doct | umentation using the "Upload" button below. |
| Choose File Choose File No file choser | n |
| 2023-24 Tech | anology Request Form |
| COST ANALYSIS | |
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| that you may not be able to fully answer on the information you provide, District may conduct a Statement of Work (SO time to implement, employee hours, no needs for a campus and/or district pro- with current systems, etc. | er all of these questions independently.Based ct IT and/or Instructional Computing Services W) analysis and provide input on items such as umber of individuals needed to implement, the |
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| General Fund | |
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| Grant Other (ulasses | |
| Other (please s | респу) |
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| | 2023-24 Technology Request Form |
| Grant Funding So | ource |
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| * 1. Please specify the | he grant that will fund the technology you are requesting. |
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| | 2023-24 Technology Request Form |
| Evaluation Plan | |
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| G. Evaluatin | ng the Technology |
| G. Evaluatin Evaluation | g the Technology |
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| 2023-24 | Technology | Request | Form |
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| Off-Cvcle | Requests | Only |
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| 1. What are the exigent circumstances and/or contributing factors that would qualify this request to be eligible for Off-cycle consideration? Please explain why this request cannot wait until the next annual planning cycle. |
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| 2023-24 Technology Request Form |
| Technology Request Process |
| 1. How can the Technology Request process be improved for next year? |
| 2023-24 Technology Request Form |
| Ready to Submit |
| 1. Are you ready to submit your technology request? Yes No |