PROGRAM REVIEW & PLANNING SUPPLIES, EQUIPMENT, AND MISCELLANEOUS REQUESTS FORM

This form is to request supplies, equipment, and/or make miscellaneous requests.

- **Supply**: A material item of an expendable nature that is consumed, wears out, or deteriorates in use; or one that loses its identity through fabrication or incorporation into a different or more complex unit or substance.
- **Equipment:** Tangible property with a purchase price of at least \$200 and a useful life of more than one year. Technology related items such as hotspots, computers, tablets should be requested through the College Technology Committee.
- Miscellaneous: All non-operational requests and requests that do not fall under staffing, technology, or facilities requests are considered other requests. For department operational needs, please discuss with your Dean's office.

The Resource and Operations Council uses the following criteria to rank all requests. The following criteria will be ranked on a scale of 1-5, with five being the highest score.

1. Health and safety

- 2. Critical need
- 3. Program expansion/innovation
- 4. Impact on student success and access
- 5. Equity and Antiracism

Contact Person:

Name	Email Address		
Department:			
Title of Request:			
	,		

Location of Request:	
ype of Request:	
	erial item of an expendable nature that is consumed, wears out, or deteriorates in use; or one that or incorporation into a different or more complex unit or substance.)
	ngible property with a purchase price of at least \$200 and a useful life of more than one year. ch as hotspots, computers, tablets should be requested through the College Technology Committee
	(All non-operational requests and requests that do not fall under staffing, technology, or facilities requests. For department operational needs, please discuss with your Deans office.)
Please specify miscella	neous request:
	ption of the supplies, equipment, or miscellaneous request. When making your pecific as possible and include information such make, model, manufacturer,
oloi, qualitity, etc.	
stimated Cost:	
pdated: September 2024	
he Budget Resource and Opera ouncil (BROC)	ation

Please attach quote, if available.		
Total Cost of Ownership:		
Vous requested item may incur engaing	avnances Mhat are	the engeing evenence accepiated with your
		e the ongoing expenses associated with your
		ou plan to support these costs with your
existing budget by completing the table	below.	
	Cost	Additional information (optional)
Initial Cost of Item		
Service Agreements/Warranties		
Maintenance		
Upgrades		
Impacts to Staffing		
Replacement Costs		
Other:		
Total	\$	
Amount available in department		
budget to support this request		
Smartkey:		
Remaining requested amount	\$	
Justification of Request:		
Please select the criteria(s) and provid	e the details how th	is criteria(s) meet your request.
Health and safety		

Critical need				
Program expansion/Inno	ovation	t	nnovation	
Impact on student succe	ess and access		Equity and Antiracisn	n
The justification of the request is by providing a robust rationale of those reviewing the justification information and context can help	etailing all relevant c may not be familiar v	riteria. When writin with your departme	g the rationale, keep	in mind tha

Please identify the program goal(s), as stated in your current annual or comprehensive program review, that this request would help your program achieve. Provide a brief explanation of how it would do so.				

Updated: September 2024 The Budget Resource and Operation Council (BROC)

Program Goals: