

Missouri State University Information Technology Proposal Form

Project Title: _____

Proposed by: _____ Department: _____

Proposal Type (select only one):
 Student Computer Usage Fee
 Library Technology and Networking

REQUIRED SIGNATURES

(Approvers may attach additional sheets to include comments if desired.)

IF ORIGINATING FROM AN ACADEMIC DEPARTMENT:

Department Head: _____ Date: _____

College IT Committee Chair: _____ Date: _____

College Dean: _____ Date: _____

Provost: _____ Date: _____

IF ORIGINATING FROM A NON-ACADEMIC DEPARTMENT:

Department Head: _____ Date: _____

Vice President: _____ Date: _____

This form is to be used to submit those information technology proposals for review and/or funding which are “large-scale” or have the potential to impact the university’s technical infrastructure, other units, and/or technical personnel requirements. (If multiple projects are being submitted, please indicate the relative priority of each.) This form and the associated approval/review process are intended to be informative in nature. Once the IT Council receives a completed form for review, it will endeavor to provide timely feedback so as not to delay the project.

Once all required signatures have been received (via academic or non-academic route), please forward completed form to the Office of Information Technology, Carrington 104.

Do not write below this line

Information Technology Council: _____ Approved
_____ Approved with noted modifications
_____ Rejected

VP for Admin and Info Services’ Signature: _____ Date: _____

IT Council Chair’s Signature: _____ Date: _____

System Coord Council Approval: _____ Date: _____

A. Description of IT Proposal (including benefits)

Intended location (Building and Room) where technology items will be housed:

If proposal includes purchase of items that will replace existing University assets, please indicate intended reuse or reallocation plans.

B. Costs by Line Item (e.g., hardware, software, installation, network connectivity, additional personnel, maintenance, licenses, etc.)

1. Current Fiscal Year

2. Fiscal Year + 1

3. Fiscal Year + 2

4. Projected Life of Asset(s)

C. Proposed Source(s) of Funding

D. Description of Impact on Technology Infrastructure

(If proposal does not impact an area listed below, please write "NA" in that section.)

1. Computing Infrastructure

2. Network Infrastructure (Data or Video)

3. Instructional Technology

4. Training and/or User Support

5. Administrative Information Systems

6. Technical Personnel Requirements

7. Facility Requirements (rooms required, security, environmental conditions)

8. Can the proposed technology be fully accessed, used, and operated (with or without modifications) by individuals with disabilities? Please consider functional limitations in vision, hearing, or mobility.

9. Does the proposal impact another university unit or some other portion of the university's technology infrastructure? If so, describe.