**Indiana Wesleyan University  
Flat Panel Installation Request Form**

The following request form is to be used for the purchase of flat panel installations.

Please complete and acquire signatures by all necessary parties. Then send the request to Marty Hutchins in Institutional Media Technologies either via campus mail or email ([marty.hutchins@indwes.edu](mailto:marty.hutchins@indwes.edu)). If you have any questions in regard to this form please contact Marty Hutchins via email or phone x2418.

Top of Form

|  |  |
| --- | --- |
| Name of Requestor: |  |
| Extension: |  |
| Name of End User: (if different than requestor) |  |
| Extension: |  |
| Department of End User: |  |
| Building of End User: |  |
| Date Needed (Please be specific): |  |
|  |  |

**Flat Panel Installation Information**

|  |  |
| --- | --- |
| Building |  |
| Room Number |  |
|  |  |
| Total cost quoted by IMT |  |
| Additional Information (if necessary) |  |
|  |  |

Please Specify: Conference Room Classroom Digital Signage

Justification

I have read the IWU flat panel purchasing policy:

|  |  |
| --- | --- |
| Supervisor's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| VP Signature (if required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_ |

Account Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **IT Use Only** | |
| Date Received: | IT Dir. Approval: |