



Information Technology Services: Library

Software Request Form

Please Note: Additional or updated software will only be installed during the summer and July breaks. No Software will be installed during session. One software request per form

Software requests close off dates:

First week in **November 2008** – for Session 1 2009 requests
First week in **April 2009** – for Session 2 2009 requests



Requests received after these dates will **NOT** be processed

Name: _____ Extension: _____

Faculty/Department: _____ Mobile/Pager: _____

Software required for Subject No: _____ Session No: _____

Subject Co-ordinator _____ Extension: _____

Software Information

Software Name: _____ Version: _____

Custodian of the Software: _____ Extension: _____

Platform: (tick) PC MAC Both

Which Lab do you require this software to be installed? (Please Tick)

<input type="checkbox"/>	Lev 2 Lab 1 (40 PC's) Teaching
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Is the software Windows XP Compatible? Yes No

Does your faculty have the appropriate number of licenses required to install the above requested software?
Yes No

Are you familiar with the installation procedure of this product? Yes No

If **No** please specify alternate contact: _____

I hereby agree that the above software licensing information is correct, and has been verified.

Signed: _____ Date: _____

Office Use Only:

Date form received:	_____	Form received from:	_____
Software install date:	_____		