**APSC Design Team Request**  **Date:** Click here to enter text.

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| **REQUEST INFORMATION** |
| |  |  |  |  | | --- | --- | --- | --- | | **Name of Request :** | Click here to enter text. | **Name of Requestor:** | Click here to enter text. | | **Design Team Name :** | Click here to enter text. | **Department/Program/Year:** | Click here to enter text. | | **Faculty Sponsor:** | Click here to enter text. | **IT Contact:** | Click or tap here to enter text. | |
| **Section A - Requirements** |
| Background:  *\*Present the background on the Design Team and the high level IT needs to achieve the team’s outcome*  Click or tap here to enter text.  Requests and IT Requirements:  *\*Provide details of the request, the requirements and any associated benefits. Include any information related to hardware and software. List out the expected services and support.*  Click or tap here to enter text.  Target Schedule:  *\*When do you need the services and support*  Click or tap here to enter text.  Consequences of not Going Forward with this Request:  *\* Please detail and quantify impacts of not going forward or delaying this request*  Click or tap here to enter text. |
| **Section B – Available Funding** |
| If “Yes” what / who is the source of funding?Click or tap here to enter text.  If “Yes”, how much and is it recurring?Click here to enter text. |
| **Section C – Scope** |
| *Request Type: Select all that apply and specify any details as required.*  Virtual Server hosting Click or tap here to enter text.  License hosting Click or tap here to enter text.  Storage hosting Click or tap here to enter text.  Group Account Click or tap here to enter text.  Networking Click or tap here to enter text.  Other: Click or tap here to enter text. |
| **Section D - Additional Information** |
| What consultation has been done and with whom to develop this request?  Click or tap here to enter text.  Is there anything else that you would like to share that may help us better understand your request?  Click or tap here to enter text. |

Please email your request to [IT.Engagement@apsc.ubc.ca](mailto:IT.Engagement@apsc.ubc.ca)

**For Office Use**

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| **Section E – IT High Level Estimation** |
| *\*Estimation of services and support based on information provided.*  Click or tap here to enter text. |

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| **Section F – Approval from Dean’s Office** |
| **Approver:**  Click or tap here to enter text.  **Date:** Click or tap here to enter text.  **Comments:** Click or tap here to enter text. |
| **Section G – Commitments & Expectations** |
| *\*List of expectations and commitments to be discussed with the Design Team Liaison.* |
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