



Mecklenburg County Public Schools Software Installation Request Form

A copy of the cover of the software, license, and serial number MUST be attached to this form in order for this request to be processed.

School: Mark an "X" in the appropriate box.

BHS BMS BUE CCE CLE LCE PVH PVM SHE
 Central Office Transportation Maintenance

Requested by: _____

Room/Location: _____

Machine(s): _____
(Specify which machine, especially if more than one in room)

Software Name: _____
(Name on cover)

Software Company: _____
(Who published it?)

Software Vendor: _____
(Where was it purchased?)

Software Description: _____
(What is its purpose?)

Quantity of License: _____
(If this a single license product, it may only be installed on one machine)

Product Serial/ISBN Number: _____

Product Code Key: _____

Signatures

Requested By: _____ **Date:** _____
(By signing this form, you are verifying that you have purchased this software (through school or personal funds) and have requested the installation on one or more (where applicable) classroom computers.)

Principal: _____ **Date:** _____
(By signing this form, you are verifying the license and approving the software installation in your school.)

***** Technology Department Use Only *****

Approved/Denied

_____ or _____
Bernard Robinson, Manager of Technical Services Ron Goodwin, Assist Manager of Technical Services

Installed By: _____ Date: _____

Notes: _____
