

**RICHLAND COLLEGE  
INFORMATION TECHNOLOGY SUPPORT CENTER  
NEW OFFICE COMPUTER & PRINTER  
REQUEST FORM**

NEW INSTALL     REPLACEMENT

NEW EMPLOYEE     CURRENT EMPLOYEE

NAME: \_\_\_\_\_ USERNAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ROOM # \_\_\_\_\_ DIVISION NAME: \_\_\_\_\_ GL ACCT: \_\_\_\_\_

DATE NEEDED: \_\_\_\_\_ PHONE # \_\_\_\_\_ EST. COST: \$ \_\_\_\_\_

DEPARTMENT APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

**DOES THE ROOM HAVE:**

a). AVAILABLE ACTIVE NETWORK WALL JACKS FOR NEW EQUIPMENT     YES     NO

IF NO, HOW MANY ADDITIONAL WALL JACKS ARE NEEDED? \_\_\_\_\_

\* (There will be an additional charge of \$100.00 for each new network line installed)

b). A DESK FOR THE COMPUTER TO BE PLACED?     YES     NO

c). AN AVAILABLE ELECTRICAL OUTLET ON SAME SIDE OF WALL WHERE NEW EQUIPMENT WILL BE PLACED

YES     NO

\* (If B or C were answered as NO please contact Facilities to complete their Work Order Process)

**REQUEST: (Check all that apply)**

NEW COMPUTER (CPU)

SPEAKERS

SURGE PROTECTOR NEEDED

MONITOR:

STANDARD 17"

15" FLAT PANEL

OTHER \_\_\_\_\_

PRINTER:

PRINTER TYPE: (Check all that apply)

LOCAL (Connected to Computer)

NETWORK (Connected by Cable from Wall)

COLOR INKJET

DEPARTMENT LASERJET

PERSONAL LASERJET (Non-network)

COLLEAGUE REPORTS (Only Network Printers)

OTHER \_\_\_\_\_

\* IF THIS COMPUTER WILL BE PRINTING TO A NETWORK OR LOCAL PRINTERS, PLEASE LIST PRINTER QUEUE NAME(S) AND OR TYPE(S)    **Example 1: RLCADMIN12 – HP LaserJet 4100n**        **Example 2: Epson 1280s**

SPECIAL COMMENTS: \_\_\_\_\_

\_\_\_\_\_

**\* If NEW employee please attach the "LAN/Office Support ID Request" form.**