

Lunenburg 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" on the appropriate space.

CHS LMS KES VES Central Office Transportation
 Maintenance 21st Century/Parent Resource School Food Nutritional Services

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 published?)

Software Description: _____
(What is its purpose?)

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

Product Code Key: _____

Product Serial/ISBN Number: _____

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/Supervisor _____ **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 _____
Frances Wilson, Supervisor of Technology Matthew Early, Technical Services

Installed by: _____ Date: _____

Notes: _____
