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**Technology Purchase Proposal**

Grossmont Union High School District

Name \_\_\_\_\_

School/Program \_\_\_\_\_

Phone/Contact Info \_\_\_\_\_

**I. Goal(s):**

(Please describe intended purpose(s) &amp; specify how these objectives align to specific School, District, State or Federal goals)

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**II. Description of Need:**

(Please describe items, equipment, or services needed)

Quantity	Item
	<i>(Continued on next page, if necessary)</i>

**III. Alternative Options:**

(Please describe whether existing resources could appropriately achieve the desired goal and, if not, why?)

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**IV. Funding Source(s):**(Please specify the funding source for the acquisition of the needed items and whether future maintenance/replacement requirements will be addressed from the same funding source)

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 This proposal has been approved by my administrator/supervisor My site's technician or Tech Specialist is aware of this proposal(Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ )

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**Reviewed by Educational Technology Resources Staff:** (See attached quote information, if applicable)

Name \_\_\_\_\_ Date \_\_\_\_\_

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Grossmont Union High School District

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## **II. (Continued, If Necessary) Description of Need:**

(Please describe items, equipment, or services needed)

Quantity	Item