PCPP COMPUTER HARDWARE EXCEPTION REQUEST FORM
For non-standard computer purchases

SECTION 1: Reason for the exception to Standard computer products

Exemptions are based on technical merit and how it relates to teaching, research and or services provided.

1. Will this be connected to the U of M network? Y___ N___
2. What OS will this be running?________________________________________________________
3. Where will this equipment primarily be used: On-Campus: Office _____ Lab _____
   Off-Campus: Remote Office _____ Home _____ Travel _____
4. Will this product be supported by non UofM IT support Y___ N___ If yes, who will be supporting the product __________________________________________________________
5. Source of funding: Grant _____ / CFI _____ / Department Budget _______________________
6. Will this be connected to an instrument? If yes, please describe:_____________________
   _______________________________________________________________________________
7. Describe the technical and business reason(s) for requesting this exception:
   _______________________________________________________________________________
   _______________________________________________________________________________
   _______________________________________________________________________________
8. What functionality or capabilities does the requested equipment provide that the standard equipment does not?
   _______________________________________________________________________________
   _______________________________________________________________________________
   _______________________________________________________________________________
9. Why is the additional functionality/capability needed for your teaching, research or service?
   _______________________________________________________________________________
   _______________________________________________________________________________
   _______________________________________________________________________________

SECTION 2: Acceptance of responsibility by IT Support and Department

A. IT Support agreement
   Name and title__________________________________________, date,__________
   Email__________________________________________ signature ______________________
Please check the level of support you will be providing for this exception.

___ We will provide no support for this product; it will not be attached to the network.

___ My department is taking responsibility for updates and patches for applications and operating systems including antivirus solutions, installation of any client software required to attach to the UofM enterprise services.

___ Support will be provided on a best-effort basis, as time allows. We will not have the support of the IST infrastructure and knowledge base, which is in place for Standard computers. This means IT support staff will be on their own supporting this computer and the end user is dependent on their availability and expertise alone.

___ Full support will be provided at the cost of the IT support infrastructure in our department.

B. Dean, Director or Business Manager approval

Name__________________________, date, __________
email______________________________________________
signature____________________________________________

___ The Department is responsible for adhering to UofM computer policies, IST Standard/Guidelines and including the installation and upkeep of enterprise anti-virus client. We agree the business case warrants accepting the additional liability of support costs and time that this exception may cause.

C. End user acknowledgement of level of service to be received.

Name__________________________, date, __________
email______________________________________________
signature____________________________________________

___ I am aware of the level of support I will receive (see section A) on my product/s and would like to go ahead with ordering this product.

Attach quotation for product exception, print, sign, scan and email to marcelo.aprosoff@umanitoba.ca for approval.
SECTION 3: Comments from ITPC

ITCP approval: Name____________________________, date, ____________
signature____________________________________________

Approved ____ Yes/ _____No

Approved form must be attached to your order when placed with the BookStore.