

Technology Evaluation Form

Requestor:	Dept.:	Date:
Name of Technology / Software:		
Publisher/Manufacturer:		
Company Contact Information:		
Company Web Site:		
Purpose of Technology / Software:		
Goodwin Users:		
Version:	Operating System:	
Is this a web based solution?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If not web based list or attach hardware and other requirements:		
Initial Cost:		
Will there be a license or maintenance agreement that must be renewed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Renewal Date:	Cost:	
List other costs associated with this technology such as training, etc.:		
Does Goodwin already own technology that will serve this purpose?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If so, what is it, and why is additional technology necessary?		

Technology Evaluation Form

Can this technology be used by others at Goodwin? <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please explain:
List competitors' technology and cost: 1. 2. 3.
IT Comments:
IT Department Signature:
Can this technology be paid for with a grant? <input type="checkbox"/> YES <input type="checkbox"/> NO
Grant Department Signature:
Address concerns raised during 14-day comment period:
Department Chair/Program Director Signature:

SAMPLE

Technology Evaluation Form

Requestor:	Dept.:	Date:
Name of Technology / Software:		
Publisher/Manufacturer:		
Company Contact Information:		
Company Web Site:		
Purpose of Technology / Software:		
Goodwin Users:		
Version:	Operating System:	
Is this a web based solution?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If not web based list or attach hardware and other requirements:		
Initial Cost:		
Will there be a license or maintenance agreement that must be renewed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Renewal Date:	Cost:	
List other costs associated with this technology such as training, etc.:		
Does Goodwin already own technology that will serve this purpose?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If so, what is it, and why is additional technology necessary?		

SAMPLE

Technology Evaluation Form

Can this technology be used by others at Goodwin? <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please explain:
List competitors' technology and cost: 1. 2. 3.
IT Comments:
IT Department Signature:
Can this technology be paid for with a grant? <input type="checkbox"/> YES <input type="checkbox"/> NO
Grant Department Signature:
Address concerns raised during 14-day comment period:
Department Chair/Program Director Signature: