

Competitive Procurement Request

Project Title:			Stimulus (ARRA) Funds? Yes__ No __
Customer Contact Information			
Agency/Public University: Address:		Contact Person: Phone: Fax: Email Address:	
MAGIC Customer Number (only required from state agencies)		Division/Dept:	
		Handmail: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Summary			
Narrative Description of Project			
ITS Acquisition Approval (CP-1) should be effective through this date: (Please allow time for all vendor invoices to be paid)			
Cost Estimates			Time Constraints Item Needed by: Funds Expire:
<i>Fiscal Year</i>	<i>Initial Costs</i>	<i>Ongoing Costs</i>	
Total			
Discuss Funding (e.g. how much of needed funding is definite; total project budget; any matching or other non state funds; fund number)			
Anticipated Lifecycle of Products/System (i.e. estimate years effective use)			
Acquisition Details			
Items Requested:			
Name	Quantity	Description	Building Location(s)
Describe platform & infrastructure (connectivity; software/hardware platforms; utilization of State Data Center resources: mainframe, eGovernment portal, payment engine, document management, hosting). For equipment or hosting outside the State Data Center, attach justification:			
Progress to Date: What has been done related to this project and utilization?			
Vendors Contacted: (Note: attach written estimates or other information received from vendors)			
Critical Factor(s): (in the selection of a vendor/brand/solution for this acquisition)			

There is a charge for ITS procurement services associated with this request which will be billed to the requestor by ITS. By my signature I acknowledge that my agency/public university is responsible for these charges/costs.

 Name (Agency Head or Public University CIO)/Title

 Signature

 Date