

Instructions: Complete all required fields (as indicated by *). Submit completed form to the Department of Administration's Service Desk at servicedesk@admin.sc.gov. Incomplete or unclear forms may cause delay in completing request. Customer must ensure the following:

- Request is submitted at least **ten (10)** prior to **Need by Date** for each requested workstation
- Inventory Manager is able to allocate a functioning workstation at time of request
- All customer software requirements are included with each request

Agency Information* (Complete for all requests)			
Agency / Division *			Date *
Account	Department	Identifier	Need by Date*
Requestor Name *	Requestor Phone *	Requestor Email *	

Deployment Location Information* (Complete for all requests)			
Last Name:	First Name:	MI:	Username
Office Address:	City, State, Zip		Room / Office #

Workstation Information (Inventory manager must have workstation and peripherals available at time of request)			
Device Type		Monitor	
<input type="checkbox"/> Desktop	<input type="checkbox"/> Laptop	<input type="checkbox"/> Tablet	<input type="checkbox"/> VDI
<input type="checkbox"/> Other	<input type="checkbox"/> Single		<input type="checkbox"/> Dual
<input type="checkbox"/> Other	<input type="checkbox"/> Other		<input type="checkbox"/> Other
Inventory Manager *	Phone *	Email *	
Make	Model	Asset # / Serial Number	

Software Information			
All workstations will be imaged using a base image prior to deployment or reassignment. The base image includes windows operating system, productivity tools, anti-virus, disk encryption, internet browser, patch management, and security response utilities. Installation of customer managed applications may be requested; however this may cause a delay in the deployment schedule. Technicians will assist with the installation of customer owned applications; however the customer is solely responsible for coordinating and managing application configuration and support with third party application providers, if necessary.			
<input type="checkbox"/>	Adobe Acrobat*	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Microsoft Visio*	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Microsoft Project*	<input type="checkbox"/>	<input type="checkbox"/>

*Agency is responsible for purchasing, inventorying and the maintaining of software keys for agency licensed software.

Additional Instructions

Requestor: _____
Print Name
Signature
Date

IT Director / Liaison: _____
Print Name
Signature
Date