

Request to Purchase Curriculum Software – Secondary Schools

School/Department: _____ Date: _____

Name of Originator: _____

Department(s)/Program Area(s): _____

Signature of Program Head or Designate: _____

Software Title: _____ Version: _____

Vendor/Distributor: _____

Approx. Retail Price: _____ Contact Name: _____ Tel.: _____

Applicable Course(s): 1. _____ 2. _____ 3. _____

Overall and/or Specific Course Expectations addressed by this software:

(continue on extra pages if necessary)

For what percentage of the course(s) would this software be used? 1. _____ 2. _____ 3. _____

What other course(s) might also use this software? _____

Program Association Statement (completed after validation team has conducted pedagogical review of the software)

Program Association Chair or Designate: _____ Date: _____

Signature: _____

Next Steps

1. Program Association Chair or Designate submits this form to the Secondary Software Standards Committee, along with the pedagogical review from the validation team.
2. Secondary Software Standards Committee assesses request and responds to Program Association.

Office Use