

Request for Deviation from Personal Computer Standards

Fill out this form to justify a deviation from an information technology standard as per [University Policy AD2515](#), or to request [Computer Acquisition Fund](#) (CAF) approval for alternate systems. For AD2515 deviations, complete the first page of this form and attach a signed, scanned copy to your [WebReq](#) submitted to [TSC](#). For CAF alternate systems approvals, complete both pages and submit to your Chair for signature on the second page, then forward to the Dean's office.

Information technology devices which primarily interact with Enterprise Information Systems must be encrypted (e.g. password protected) both during storage on and transmission between information technology devices. All faculty and researchers are responsible for protecting data and are encouraged to acquire institutional encrypted standard devices that are supported by the university's central encryption service.

Below, please explain how job requirements cannot be achieved by using standard information technology devices, or how standard devices do not meet your needs. Include examples if appropriate.

Make and model of requested device(s):

Contact Information

Name: _____

Department/Academic Unit: _____

(UVic) Phone Number: _____

Email Address: _____

Request Type

CAF

AD2515

Signatures required in this section for AD2515 requests only:

PLEASE NOTE: As Per University Policy AD2515, Section 7.02, the Director responsible for the Technology Solutions Centre will review the justification document and either permit and record the deviation or escalate the requested deviation to the Chief Information Officer.

Name of Associate Vice-President, Dean or Executive Director (or Delegate)

Signature of Associate Vice-President, Dean, or Executive Director (or Delegate)

Date

For CAF alternate systems approvals, continue to next page.

Complete and sign this page for CAF alternate systems approvals only
 Most recent PC Acquisition allocation received for purchase of computers/software

Source: _____

Amount: _____

Year: _____

Estimated Cost of alternate systems (including tax)

Description	Price
Estimated cost (including tax)	
50% from Fund will provide	
If approved, your cost will be	

How will the requested system be used to directly enhance teaching and research?

CAF Funding Requested

 Signature of Applicant

 Date

 Signature (acknowledgement) of Chair/Director

 Date

 Signature of Dean

 Date

Dean's Ranking: ____ of ____ applications (Please provide brief comments on the application and its rank)