

Computers for Schools

Request for Computer Equipment

Organization Name: _____

Registered Charity Number: _____

Contact Name: _____

City: _____ Province: _____

Email: _____ Phone: (____) _____

Please complete the following:

1. What is the population of your client base? _____

2. How much equipment are you requesting?

____ Computer & Monitor ____ Printers
____ Computers only ____ Monitors Only
____ CD Burner (if available) ____ Other Items (please specify) _____

3. Please describe the utilization plan of computers made available under this program:

Name of Executive Director: _____

** In signing for computer equipment, I acknowledge that equipment will be used for purposes described in part 3, and will NOT be used as a fundraiser/raffle item, nor sold for profit.

Signature: _____ Dated: _____

**Computers for Schools - 155 Queen Street, 4th Floor
Ottawa, ON K1A 0H5**

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<http://cfs.ic.gc.ca>**