



**CALVARY CHAPEL**  
C O S T A M E S A

## **Computer Request Form**

Computer Request Forms must be submitted by a department head and will be reviewed by CCTS.  
All fields are required. Once completed attach this PDF to a ticket at [helpdesk.ccm.com](https://helpdesk.ccm.com)

**Date Requested (MM/DD/YYYY):**

**Name of employee in need of a computer:**

**Job role of employee:**

**Department Head Email:**

**Ministry/Department:**

**Ministry/Department Manager:**

**How long has the current computer been used?**

**Does the person needing this computer have an office?**

**What hours does the person needing this computer work?**

**What is the reason for this computer request? Please be specific.**

**Is travel required for this job? (if so, please explain)**

**What are the primary functions you use this computer for?**

Email

Word Processing

Graphic Design

Bible Study Software

**Please list the software you need installed on this computer.**

**Is your department aware of your need and have they agreed to accept the charge back for this expense?**

YES

NO

**What GL should this expense be applied to?**

**Do you agree to turn in your old device to CTS for redistribution per CCCM policy?**

YES

NO

**Do you agree to turn in your old device upon receiving your new device after CTS helps you transfer your data?**

YES

NO