



# Instructional Equipment Request (IER) Form FY 2022-2023

## Deadlines

| Date             | Action   |
|------------------|--|
| October 12, 2022 | IER forms due to Division Dean   |
| October 19, 2022 | Division review of IER forms (Dean & VP signature)   |
| October 21, 2022 | IER forms due to Executive Assistant of Administrative Services (with Dean & VP signature) |

## Checklist

- All IER form fields complete (**attach requisition and quote before e-signing IER form**)
- Requisition completed and attached
- Valid quote attached (with extended expiration date) including (1) shipping costs, (2) installation fees, and (3) taxes. **Do not split quotes or submit duplicate quotes.** For assistance with quotes, please contact Bill Pagano at [bpagano@clpccd.org](mailto:bpagano@clpccd.org) or (925) 485-5271.
  - If the quote total (including taxes) ranges from **\$30,000 to \$99,099**:
    - You must submit **three** written quotes with your request.
  - For quotes of **\$99,100 or more**, the request must go out for bid (aka RFP process) and requires Board approval. You will be provided further instruction after your request is approved.
- IER form and requisition signed by Requestor
- IER form, requisition, and quote submitted as one PDF file to Division Dean including:
  - New Vendor Form (if new vendor)
  - Copy of W9 (if new vendor)

\*Note: Mac Users – do not use Apple Preview to complete forms – data will not appear when printed.

## IER Process Flow

1. All paperwork filled out and signed by Requestor
2. Requestor submits to Dean for signature
3. Dean submits to VP for signature
4. VP submits to Executive Assistant of Administrative Services for review
5. EA Admin Svcs submits to M&O and IT for review
6. EA Admin Svcs creates scoring spreadsheet and disseminates to committee
7. RAC scores submissions and returns to EA Admin Svcs
8. EA Admin Svcs combines committee scores for review
9. RAC Chair documents committee scoring in memo
10. College President meets with RAC Chair to review committee recommendations
11. President's Office provides approval memo to RAC
12. RAC submits IER forms to Business Office for processing

# Instructional Equipment Definitions

## Allowable Items

**Allowable Items:** Instructional equipment expenditures are eligible if the equipment, library material, or technology is for classroom instruction, student instruction or demonstration, or in the preparation of learning materials in an instructional program. There are five categories that will be used to classify instructional support. Please note that requests are not limited to the examples shown below.

1. **Equipment and Furniture:** instructional equipment and furniture for primary use by students in instructional programs:
  - a. Classroom/laboratory equipment including whiteboard, screen, projector, etc.
  - b. Instructional furniture including desks, tables, podium, chairs, etc.
2. **Information Technology:** instructional information technology equipment for student use in classrooms and/or laboratories including desktops, laptops, monitors, printers, servers, network/wireless infrastructure, AV/TV, multimedia.
3. **Software:** software licenses are allowed but only the initial year is permitted. Other software that are permitted are those that are used in excess of one year and software modifications that add capacity or efficiency to the software that defers obsolescence and results in an extension of the useful life of the software, including registration, counseling, student services, learning management systems for student use.
4. **Adaptive Equipment:** adaptive equipment for ADA/OCR students are allowed to assist them in a learning environment.
5. **Library Material:** databases, online subscriptions, books, periodicals, videos, etc.

## Non-Allowable Items

**Non-Allowable Items:** Administrative or non-instructional purposes including equipment being used for administrative or non- instructional purposes is not allowed, including photocopiers, file cabinets, bookcases, computers, networking infrastructure, software licenses.

## IE Rubric

RAC evaluates each IE request based on the rubric below. RAC stresses the importance of quality requests. RAC may choose not to rank incomplete IE requests.

| Criteria  | Strong Evidence  | Adequate Evidence  | Limited Evidence  |
|---|--|--|---|
| <b>LPC Mission &amp; Planning Priorities</b><br>[Section 2]<br>(5 points)<br>Ranking Scale                          | Clear and compelling evidence/data that equipment will fully support LPC Mission and Planning Priorities.<br>4-5                                 | Clear evidence/data that equipment will fully support LPC Mission and Planning Priorities.<br>2-3                                | Limited or no evidence/data that equipment will support LPC Mission and Planning Priorities.<br>0-1                             |
| <b>Educational Items: Programmatic Impact and Institutional Support</b> [Section 3]<br>(10 points)<br>Ranking Scale | Clear and compelling evidence/data (as stated in program review) that this equipment will have substantial impact on program curriculum.<br>8-10 | Clear evidence/data (as stated in program review) that this equipment will have substantial impact on program curriculum.<br>4-7 | Limited or no evidence/data (as stated in program review) that this equipment will have an impact on program curriculum.<br>0-3 |
| <b>Teaching &amp; Learning</b> [Section 4]<br>(10 points)<br>Ranking Scale  | Clear and compelling evidence/data that equipment provides much needed or beneficial enhancement to instruction.<br>8-10                         | Clear evidence/data that equipment provides enhanced instruction that is not met through current means.<br>4-7                   | Limited or no evidence/data that equipment provides enhanced instruction that is not met through current means.<br>0-3          |
| <b>Outcomes</b> [Section 5]<br>(5 points)<br>Ranking Scale  | Clear and compelling evidence/data that equipment will support course and/or program outcomes above and beyond current capability.<br>4-5        | Clear evidence/data that equipment will support course and/or program outcomes beyond current capability.<br>2-3                 | Limited or no evidence/data that equipment will support course and/or program outcomes beyond current capability.<br>0-1        |

# Instructional Equipment Request Form

Name of Requestor: \_\_\_\_\_ Division: \_\_\_\_\_

This Equipment Request is:  A Replacement |  An Upgrade |  New Equipment or Technology

## SECTION 1: Equipment Description

Describe the specific equipment requested and how it will be used to replace, upgrade, or provide new technology to LPC from what is currently in place:

### Equipment Location

Building #: \_\_\_\_\_ Room #: \_\_\_\_\_

### Comments:

**If applicable, describe the legal requirement, mandate, or safety concern related to the purchase of this equipment, making specific reference to legal requirements or regulations:**

## SECTION 2: LPC Mission Statement and LPC Planning Priorities

### LPC Mission Statement

Las Positas College is an inclusive, learning-centered, equity-focused environment that offers educational opportunities and support for completion of students' transfer, degree, and career- technical goals while promoting lifelong learning.

### LPC Planning Priorities

- Establish a knowledge base and an appreciation for equity; create a sense of urgency about moving toward equity; institutionalize equity in decision-making, assessment, and accountability; and build capacity to resolve inequities.
- Increase student success and completion through change in college practices and processes: coordinating needed academic support, removing barriers, and supporting focused professional development across the campus.

**Explain how the equipment supports LPC's Mission Statement and Planning Priorities:**

SECTION 3: Educational Items | Program Review

**Specify the educational programs the equipment supports:**

**Is the equipment part of an upcoming Program Review? Was it included last year? If not, why? Use language from your Program Review to explain:**

**SECTION 4: Teaching and Learning**

**Please use evidence and data that describes how the equipment provides enhancements/benefits to the current level of teaching capabilities:**

**Detail the impact the equipment has on learning:**

**Please state the number of classes and students the equipment will impact:**

|                          |                  |
|--------------------------|------------------|
| <b>Classes/Sections:</b> | <b>Students:</b> |
|--------------------------|------------------|

SECTION 5: Student Learning Outcomes (SLOs)

**Document how the equipment will enable you to surpass your current Student Learning Outcomes:**

A large, empty rectangular box with a black border, intended for documenting how the equipment will enable surpassing current Student Learning Outcomes.

SECTION 6: Total Cost of Ownership | Maintenance and Sustainability

**Please provide the lifespan of the proposed equipment:**

**What are the requirements and associated costs for the storage of the equipment?**

**Is there a specific location required to store the equipment?**

*Note: include storage costs in Part A: Initial Start-Up Costs (pg. 10)*

**Does the new equipment replace older equipment? If so, will you retire/surplus the old equipment? If not, where will you store the older equipment and what are the associated storage costs?**



SECTION 6: Total Cost of Ownership | Maintenance and Sustainability (cont'd)

**What are the maintenance costs associated with the regular upkeep of the equipment?**

**Detail how the equipment meets or exceeds [LPC's Sustainability Efforts](#):**

**How does the equipment provide renewal resources to the college?**

SECTION 6: Total Cost of Ownership | Maintenance and Sustainability (cont'd)

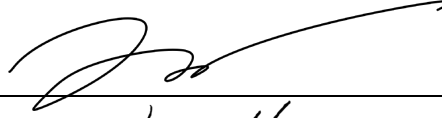
| Part A: Initial Start-Up Costs        |      |          |
|---------------------------------------|------|----------|
| Type                                  | Cost | Comments |
| Equipment or Materials                |      |          |
| Shipping & Delivery Fees              |      |          |
| Installation Costs                    |      |          |
| Miscellaneous Costs                   |      |          |
| Modification to Facilities            |      |          |
| Operator Training                     |      |          |
| Maintenance/Repair Training           |      |          |
| Storage                               |      |          |
| Other                                 |      |          |
| Discounts (enter as negative)         |      |          |
| <b>Sub-Total</b>                      |      |          |
| <b>Taxes</b>                          |      |          |
| <b>Grand Total</b>                    |      |          |
| Part B: Annual Operating Costs        |      |          |
| Type                                  | Cost | Comments |
| Service/Maintenance                   |      |          |
| Part Replacement                      |      |          |
| Vendor Calibration or Standardization |      |          |
| Storage                               |      |          |
| Supplies                              |      |          |
| Maintenance/Repair Labor              |      |          |
| Software Licensing                    |      |          |
| Other                                 |      |          |
| <b>Grand Total</b>                    |      |          |
| <b>Overall Cost:</b>                  |      |          |

SECTION 6: Total Cost of Ownership | Maintenance and Sustainability (cont'd)

| Operator   |  |
|--|--|
| Primary operator:                                    |  |
| Does the work align with current position duties?    | <input type="checkbox"/> Yes   <input type="checkbox"/> No |
| Cost to train primary operator:                      |  |
| Approx. # of hours equipment will be used per month: |  |
| Comments:  |  |
|  |  |
| Maintenance and Repairs                              |  |
| Who will perform maintenance and repairs?            |  |
| Estimated hours per month:                           |  |
| Does the work align with current position duties?    | <input type="checkbox"/> Yes   <input type="checkbox"/> No |
| Cost to train for maintenance and repairs:           |  |

**Approvals and Signature Routing**

Before signing below, please confirm all fields are filled out and all information provided is correct. Requests must be fully complete, signed, and submitted to your Division Dean by the deadline (see page 1). **Requisition and quote must be attached to this form before signing. Adobe prevents adding pages once a document has been e-signed.**

|   |   |              |          |
|---|---|--------------|----------|
| <b>Requestor:</b>                               |  | <b>Date:</b> |          |
| <b>Division Dean:</b>                           | Nan Ho  | <b>Date:</b> | 10/12/22 |
| <b>Vice President:</b>                          |   | <b>Date:</b> |          |
| <b>College Technical Service Manager:</b>       |   | <b>Date:</b> |          |
| <b>M&amp;O Director:</b>                        |   | <b>Date:</b> |          |
| <b>Vice President, Administrative Services:</b> |   | <b>Date:</b> |          |

| QUOTATION    |                      |                    |        |
|--------------|----------------------|--------------------|--------|
| Quote Number | Valid From           | Valid To           | Page   |
| 8031967963   | 10/11/2022           | 11/10/2022         | 1 of 2 |
| Currency     | Sales Representative | Customer Reference |        |
| USD          | Tammy Tribble        |                    |        |


| To Place an Order |                |
|-------------------|----------------|
| Phone :           | 1-800-932-5000 |
| Fax :             | 1-866-329-2897 |
| Web :             | www.vwr.com    |

| Quote Prepared For  | Contact Phone / Fax / E-Mail  |
|---|---|
| Jennifer Pereira  | jpereira@laspositascollege.edu  |
| Ship To : 80084039  | Sold To : 80084039  |
| LAS POSITAS COLLEGE<br>STATE OF CA CONTRACT 7 16 99 26<br>01<br>3033 COLLIER CANYON RD<br>LIVERMORE CA 94551-9797 | LAS POSITAS COLLEGE<br>STATE OF CA CONTRACT 7 16 99<br>26 01<br>3033 COLLIER CANYON RD<br>LIVERMORE CA 94551-9797 |

When placing your order, please include your quotation number and account number to ensure you receive the correct price.

**THANK YOU FOR THE OPPORTUNITY TO EARN YOUR BUSINESS.**

| Additional Information : |
|--------------------------|
| NASPO / Quote 4 of 5     |

| Row | VWR Catalog Number | Product Description   | Qty | UOM | Unit Price | Extended Price |
|-----|--------------------|---|-----|-----|------------|----------------|
| 10  | 80094-500          | VWR MICRO INCINERATOR 120V  | 6   | EA  | 403.88     | 2,423.28       |
|     |                    |  VWR® Micro Incinerator<br>Product Link : <a href="https://us.vwr.com/store/catalog/product.jsp?catalog_number=80094-500">https://us.vwr.com/store/catalog/product.jsp?catalog_number=80094-500</a><br>Shipping Dimensions Weight / Size (L*W*H) per UOM : 3.350 LB / 10.100*8.500*11.200 IN<br>UOM Component Info : EA(1items)<br>Availability : In Stock |     |     |            |                |

Item Total : 2,423.28  
 Estimated Tax : 248.39  
**Quote Total : 2,671.67**



| QUOTATION    |                      |                    |        |
|--------------|----------------------|--------------------|--------|
| Quote Number | Valid From           | Valid To           | Page   |
| 8031967963   | 10/11/2022           | 11/10/2022         | 2 of 2 |
| Currency     | Sales Representative | Customer Reference |        |
| USD          | Tammy Tribble        |                    |        |

Financing Available. Contact your VWR Representative for details about flexible financing programs.

VWR International's Terms and Conditions of Sale apply. A copy is available on our website ([https://us.vwr.com/store/content/externalContentPage.jsp?path=en\\_US/about\\_vwr\\_terms\\_conditions\\_product\\_sales.jsp](https://us.vwr.com/store/content/externalContentPage.jsp?path=en_US/about_vwr_terms_conditions_product_sales.jsp)), or by request. Customer represents that it has read and agrees to VWR International's Terms and Conditions of Sale.

Identified stock status is based on product availability at time of the quote and may change at time of order. Delivery dates are based on standard lead times from suppliers.

Charges displayed on the quotation including freight, tax and other charges are estimates and may vary at time of order.

Any images used are not necessarily representative of any product offering from VWR International and do not constitute the basis for purchase decisions.

Customer is responsible for unloading and providing standard receiving facilities for large and/or heavy shipments. Special unloading or delivery can be arranged, provided VWR International is notified at the time of order placement. For such arrangements, please contact VWR International for a quotation. All quotes for installation assume that services related to the equipment are in place at the Customer site (including, but not limited to, gas, plumbing, electrical and ventilation) as per the equipment manufacturer's specifications prior to the installation of the equipment. Installation or other services are not included in this quotation, unless otherwise noted on the quotation.

Customer has a limited amount of time to document and report any shipping damage. Please inspect all shipments upon receipt and refer to Section 4 of VWR International's Terms and Conditions of Sale for additional information.

Items prefixed with "MISC" are subject to regulatory approval once VWR International receives acceptance from the customer. They are special order, and as such may not be returnable. Please allow 6-8 weeks delivery from the time of your first order or acceptance of this quotation.



Office of Administrative Services

(Wait 5-10s)

Requisition Request Form

R \_\_\_\_\_ - \_\_\_\_\_

| Fiscal Year        |        | Vendor ID # | Vendor Name                   |            |               | Date Required |
|--------------------|--------|-------------|-------------------------------|------------|---------------|---------------|
|                    |        |             |                               |            |               |               |
| Deliver To         |        | Room #      | Return Copy of Requisition To |            |               |               |
|                    |        |             |                               |            |               |               |
| Seq                | Item # | Description | Qty                           | Unit Price | Extended Cost |               |
| 1                  |        |             |                               |            |               |               |
| 2                  |        |             |                               |            |               |               |
| 3                  |        |             |                               |            |               |               |
| 4                  |        |             |                               |            |               |               |
| 5                  |        |             |                               |            |               |               |
| 6                  |        |             |                               |            |               |               |
| 7                  |        |             |                               |            |               |               |
| 8                  |        |             |                               |            |               |               |
| 9                  |        |             |                               |            |               |               |
| 10                 |        |             |                               |            |               |               |
| 11                 |        |             |                               |            |               |               |
| 12                 |        |             |                               |            |               |               |
| 13                 |        |             |                               |            |               |               |
| 14                 |        |             |                               |            |               |               |
| 15                 |        |             |                               |            |               |               |
| Comments           |        |             |                               | Subtotal   |               |               |
|                    |        |             |                               | Tax        |               |               |
|                    |        |             |                               | Shipping   |               |               |
|                    |        |             |                               | Total Cost |               |               |
| FOAP to be Charged |        |             | %                             | Amount     |               |               |
|                    |        |             |                               |            |               |               |
| FUND               | ORG    | ACCOUNT     | PROGRAM                       |            |               |               |
|                    |        |             |                               |            |               |               |
| FUND               | ORG    | ACCOUNT     | PROGRAM                       |            |               |               |
|                    |        |             |                               |            |               |               |

*Nan Ho*      *10/12/22*

Requestor (print name) \_\_\_\_\_ Date \_\_\_\_\_

Dean (signature) \_\_\_\_\_ Date \_\_\_\_\_

*[Signature]*  
Coordinator/Manager (signature) \_\_\_\_\_ Date \_\_\_\_\_

Vice President (signature) \_\_\_\_\_ Date \_\_\_\_\_

| OFFICE OF ADMINISTRATIVE SERVICES USE ONLY |  |                                    |  |
|--|--|------------------------------------|--|
| Reviewed: _____                            | Verified: _____                        | Approved: _____                    |  |
| <i>Administrative Services</i>             | <i>Administrative Services Officer</i> | <i>VP, Administrative Services</i> |  |
| PO Number: _____                           | Budget Transfer #: _____               | Entered: _____                     |  |
| TR 4/6/20                                  |  |                                    |  |