WESTERN CAPE GOVERNMENT
WESTERN CAPE EDUCATION DEPARTMENT

Application for Information & Communication Technology Items and Services

SUMMARY OF REQUEST:

A. **Directed to:**   **ITOPSCOM REF: WCED_____**

Item No _____

THE CHAIRPERSON
Departmental Information Technology Operational Committee (ITOPSCOM)
Western Cape Education Department
Att: The Secretariat, 19th Floor, Golden Acre, Cape Town

B. **Equipment/Services Required:**

Description/Details Of Items/Services Required	Contract/Item Cost
TOTAL	

C. **Motivation:**

1. Purpose and necessity for obtaining the equipment/services.

   _____

2. What improvement will the equipment or items bring about?

   _____

   _____

3, What is the intention with the old equipment? (Disposal Process)

D.   Applicant detail

Name:

Rank:

Contact No:

e-Mail Address:
Component:

Signature: _____   Date:

E.   Recommendation by Directorate or Chief Directorate Head

Recommendation/
Comments:

_____

Name:

Rank:

Signature: _____   Date:

F.   Declaration by Program Manager

Subject to the recommendations of the Committee, I authorise the acquisition of the above equipment in accordance with all relevant financial and procurement administration directives.

I certify that an amount of **................**to cover this expenditure is included in the budget for the current financial year, under the following allocation as per **BAS codes:**

    FUND:
    OBJECTIVE:
    PROJECT:
    RESPONSIBILITY:
    ITEM:
    REGIONAL IDENTIFIER:
    ASSETS:

The funding for the request will be paid from:

- Directorate's Own Budget   ☐

- Redesign Fund   ☐

- Technology Refresh   ☐

- No funding required (Access to Services e.g. ☐
  Internet, Persal, etc)

    ....……………………...........................
    Program Manager / Responsibility Manager   Date:
    Note that District applications should be countersigned by the CD: Districts

G. Confirmation by:
   ICT District Services Manager (For applications from EDO)
   Technology Manager (For applications from Corporate Users/Head Office)
   Technology Manager (For applications – schools)

Confirmation: _____

Name: **Signature:**   **Date:**

H. Recommendation by Director: DGITO ECAS Cluster

Recommendation/
Comments:
   _____

Name: MS. A. BASHA

Rank: Director: DGITO ECAS Cluster

Signature: _____   Date: _____

I.   Decision of IT Operational Committee

Approved / Not approved / Comments: _____

Escalated to the IT STEERCOM as:

Non-Standard request   [ ]   Above Threshold   [ ]

_____   _____

Chairperson   IT Operational Committee   **Date**

J.   Decision of the IT Steering Committee

_____   _____

Chairperson   IT Steering Committee   **Date**

Notes:

1. It is the responsibility of the originator of the request to ensure that the correct application form is used, that it is completed correctly, signed by all of the relevant role-players, confirmation of funding is clear, it contains sufficient motivation of what the request is for, for who it is intended and why the requested ICT items or services are in fact required.

2. Additional information may be provided by way of annexures.

3. Ad-hoc applications will be only considered in extreme or urgent cases and must be presented directly to the Chairperson of the IT Operational Committee by the originator of the request.

4. Request for IT services and hardware from the EDO's must first be vetted by the relevant ICT Services managers in consultation with the relevant Technology Managers to ensure consistency of policies, guidelines and standards. This will avoid unnecessary delays and speed up applications to the ITOPSCOM.

5. Late applications will no longer be tolerated and must reach the Secretariat at least 7 days before ITOPSCOM meetings.

6. An indication of the estimated costs must be provided

7. The originator of the request must ensure that their Branch representative is present at the ITOPSCOM meeting in order to present their case, failing which the originator must attend the ITOPSCOM meeting to present the application.