

REQUEST FOR NETWORK CABLING SUPPORT

TO: Network Support Services Branch, Office of Information and Telecommunication Services

1. Date of Request: _____
2. FROM: School: _____
3. Name of school coordinator: _____ Signed: _____ Tel No.: _____
4. Principal's Name: _____ Signed: _____ Tel No.: _____

Nature of Request (What do you want NSSB to do for your school?):

5. NSSB is being requested to install cables _____ to terminate _____ others _____
6. NSSB is being requested to train & supervise volunteers on cabling _____ termination _____ testing _____ Others _____
7. Others _____

Description of Network Cabling:

8. Please describe briefly the cabling plan. Include the buildings, classrooms, priorities, number of connections, type of cabling, LAN, telephone, Cable TV, etc. Include incremental plans if planned cabling may not be done all at one time. Attach diagrams of the cabling plans.

Network Project Status (check all that apply):

9. Has school technology plan been prepared and approved by the school staff? _____
10. Has NSSB reviewed and approved the school cabling plan? _____
11. Has the cabling materials list been prepared? _____ by NSSB staff? _____ if by other, by who? _____ attach the list
12. Has actual cost quotation been obtained from the vendors? _____ please list _____
13. Does the school have funds to procure the materials? _____ this FY? _____ other _____
14. Has Facilities Branch been consulted? _____
15. Are there any facilities problem: asbestos? _____ grounding? _____ others _____
16. Has school done a physical survey of existing conduits? _____ Need new conduits installed? _____ between _____
17. Is there sufficient electrical power: for classrooms? _____ MDF? _____ IDF? _____
18. Does the school plan to use volunteers to provide labor for cabling? _____
How many volunteers will be available? _____ will they be available at regular working hours? _____
19. Please describe any other plan the school has to provide the labor required for the network cabling:

Desired Cabling Work Dates:

20. Cabling Start Date: _____
21. Desired Cabling Completion Date: _____

FOR NSSB USE Only:

Date Received: _____ Assigned to: _____

Estimated working days: _____

Estimated Start Date: _____

Estimated Completion Date: _____

See NSSB's reply and comments on the back of the form