

**Form for schools****Application form for IT equipment request**

1. IDENTIFICATION	
<b>Name of school:</b>	
Type of school:	
Number of students:	
Number of teaching staff:	
Number of other staff:	
<b>Website address:</b>	
<b>Legal status:</b> <i>(Please provide evidence that you are operating as a licensed school)</i>	
<b>Postal address of school:</b>	
Street name and number:	
Post code:	
Cedex:	
Town city:	
Country:	
<b>Person in charge of the request:</b>	
Name:	
Title and function within the requesting organisation:	
<b>Contacts:</b>	
Telephone No:	
Fax No:	
Email:	
2. PURPOSE OF IT EQUIPMENT	
<b>Description of the use to be made of the IT equipment:</b>	

Signature

Date