

If you are using a Mac computer to fill out the PDF forms, please make sure you are not on "Apple Preview" mode because the data entered in the form fields will not show when the documents are printed.

INSTRUCTIONAL EQUIPMENT REQUEST 2021-2022



Internal Use
IE #: 2022 - 15 _____
Total \$: 14,217.94 _____

LPC ADMINISTRATIVE SERVICES - REQUISITION INFORMATION PAGE

Requester Name: _____ **Division Name:** _____

Equipment Name: _____

The Equipment is: A Replacement An Upgrade New Equipment/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:** _____

Location Comments:

SECTION 1: EQUIPMENT DESCRIPTION (continued)

If applicable, describe the legal requirement, mandate, or safety concern for purchase of this equipment, making specific reference to the legal requirement or regulation:

SECTION 2: LPC MISSION STATEMENT AND LPC PLANNING PRIORITIES

LPC MISSION STATEMENT:

Las Positas College provides 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 life-long learning.

LPC PLANNING PRIORITIES:

- ❖ Implement the integration of all ACCJC standards throughout campus structure and processes.
- ❖ 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.

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

SECTION 3: EDUCATIONAL ITEMS – PROGRAM REVIEW

Specify the educational programs this equipment supports:

Will this equipment be a part of your upcoming Program Review or was it included last year? Please explain using the exact words from your Program Review. If not, explain why.

SECTION 4: TEACHING AND LEARNING

In detail describe evidence and data that equipment provides much needed benefit and enhancement to teaching beyond current capabilities.

Describe in detail the impact this equipment will have on learning:

Each academic year, this equipment will impact: ____ # of classes/sections ____ # of students

SECTION 5: OUTCOMES (SLOs)

Using your documented SLOs, specify how the equipment will enable student learning outcomes to be achieved beyond current capability.

SECTION 6: TOTAL COST OF OWNERSHIP (FINANCIAL & SUSTAINABILITY)

What is the potential life span of the requested equipment?

If new storage is needed what are the storage requirements, location requirements, and costs associated with the new equipment: (NOTE: Specific storage costs should be detailed in the “Part A: Initial Start-up Costs” section below.)

If this equipment replaces old equipment but the old equipment will not be retired, are there on-going storage requirements, location requirements, and costs associated with the old equipment? If so, provide details.

What will be required to maintain the equipment, such as regular servicing or upkeep? (Specific on-going costs should be detailed in the “Part B: On-Going Annual Operating Costs” sections below as applicable.)

Explain how this equipment meets or exceeds basic sustainability efforts and/or provides renewable resources to the college:

Part A: Initial Start-up Costs

<u>Item</u>	<u>Cost</u>	<u>Comments</u>
Equipment or Materials		
Taxes (9.5%)		
Shipping or Delivery Charge		
Installation Costs *		
Miscellaneous Costs:		
Facilities Modifications		
Operator Training		
Maintenance & Repair Training		
Storage		
Other: _____		
Vendor Discount		
Grand Total:		

Part B: On-Going Annual Operating Costs

<u>Item</u>	<u>Cost</u>	<u>Comments</u>
Annual Service or Maintenance		
Estimated Parts Replacement Per Year		
Outside Standardization or Calibration Costs		
Storage Costs		
New Supply Costs		
Maintenance & Repair Labor		
Licensing or Software		
Other: _____		
Annual Operating Costs:		

Indicate the source of funding for on-going annual operating costs:

Part C: Incremental Labor Costs

OPERATOR:

Indicate the key operator: _____

Is this in their current scope of duties? _____

Indicate cost to train key operator (include in Initial Start-up Costs above): _____

Indicate amount of time per month key operator will use equipment: _____

MAINTENANCE & REPAIRS:

Indicate the person performing maintenance and repairs: _____

Is this in their current scope of duties? _____

Indicate cost to train for maintenance and repairs: _____

Indicate amount of time per month maintenance will be required: _____

SIGNATURE APPROVALS

Funded requesters will be expected to respond to a brief RAC feedback survey by a requested deadline.

- *Requests for computer-related equipment and printers will be reviewed by the LPC IT Department.*

REQUESTOR



Date

9/8/21

DIVISION DEAN/MANAGER



Date

ADMIN SERVICES, VP

Date

Admin Services will route as needed

IT MANAGER

M&O DIRECTOR

Date

Date



Picking Ticket

QUOTE ORDER

Picking Ticket #

Page

1 of 1



90936834

Ship From : 71071
 Praxair Distribution Inc
 PRAXAIR PKG SAN LNDR BRN 71071
 2615 ALVARADO STREET
 SAN LEANDRO CA 94577-4319
 510-878-7885

Ship To : 79061258 CU Cust # : MX451
 LAS POSITAS CCD
 ATTN: WELDING DEPARTMENT
 3000 CAMPUS HILL DRIVE
 LIVERMORE CA 94551-7623

Caller Name :
 Caller Phone # :

Order # : 53070910 ORD TYPE : ZQ
 Shipment #
 Order Date : 9/16/2021 Promise Date : 9/16/2021
 Order Processed By: BUS, DANNY D DE DDD
 Phone #
 Ship Via : Customer Pick Up
 Route #
 Carrier Name
 Rev Bm : 71071 9/16/2021 12:31PM EST

Sold To: 71329091
 LAS POSITAS CCD
 ATTN: WELDING DEPARTMENT
 3000 CAMPUS HILL DRIVE
 LIVERMORE CA 94551-7623

PO # : RFQ
 Release # :
 Phone # : 925-424-1137



QTY SHIP	UM	H M	ID NUMBER	DESCRIPTION & HAZARD CLASS	LINE NO	ITEM NO/ CUST. ITEM NO	QTY ORDER	QTY BKORD	CYLINDERS SHIP	TAX Y/N	VOL/ WT	UNIT AMOUNT	EXTENDED AMOUNT
1	EA			TEACHING AID TOOLBOX	1.000	LINK4442-1	1	0		Y	NA	5,947.00	5,947.00
						Mfg # K4442-1					1.00 LB		
2	EA			2	0			98.00 LB		
						Mfg # 24-16							
2	EA			2	0			10.00 LB		
						Mfg # 21027436 LOC#: 1W004							
2	EA			2	0			1.78 LB		
						Mfg # 0781-3601 LOC#: 1W04							
2	EA			2	0			1.78 LB		
						Mfg # 0781-3602 LOC#: 1W04							

SUB TOTAL 5947.00
10.25 % Tax 609.75
TOTAL = 6556.75

Total weight 112.56 LB

EMERGENCY RESPONSE TELEPHONE NUMBER:
 CALL CHEMTREC 1-800-424-9300

WARNING: Transporting flammable gases and/or hazardous materials in an enclosed van, automobile or automobile trunk is very dangerous because it can cause a fire or explosion resulting in serious injury or death. Read cylinder label warnings, Safety Data Sheets (SDSs) and/or safety booklet P-3499.

Sub Total	
Tax (%)	
Total Sales	

This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

PLACARDS OFFERED ACCEPTED REJECTED

Authorized Signature _____

Received by _____