Purchase Requisition Form

#### Westbury High School

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employee Name** | | | | **Department** | | | | | | **Date** | | |
|  | | | |  | | | | | |  | | |
| **HISD Approved Vendor Name** | | | | **Vendor Sale Rep/Contact Information (if available)** | | | | | | | | |
|  | | | | **Email:** | |  | | | | | | |
| **Phone:** | |  | | | | | | |
| **Instructional justification for Purchase relevant to TEKS and/or for student academic growth (Required):** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Funds Requested From (Required)** | | | **Purchase Method** | | | | | | | | | |
| □ School Budget  □ Department Budget/Department Name:  □ Activity Fund Name: | | | □ Requesting Business Office to Place Order  □ Requesting Preapproval for Reimbursement of Purchase | | | | | | | | | |
| **Description of Item**  ***(Please attach order forms, back-up documentation, or shopping cart print out)*** | | | | | | | **Quantity** | **Unit Price** | | | | **Total Price** |
|  | | | | | | |  |  | | | |  |
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|  | | | | | | |  |  | | | |  |
| **Total** | | | | | | | | **$** | | | | |
| **Signature/Name Typed of Requestor** | | | | | **Additional Instructions or Notes** | | | | | | | |
|  | | | | |  | | | | | | | |
| **\*Appraiser/Dept. Administrator -\*Approval required** | | | | | **Additional Instructions or Notes** | | | | | | | |
|  | | | | |  | | | | | | | |
|  | DO NOT WRITE IN THIS SPACE – FOR OFFICE USE ONLY | | | | | | | | | |  | |
| * Shopping Cart * ProCard * Reimbursement | | Fund | | | | | | | Date Processed | | | |
|  | | | | | | |  | | | |
| Card Used | | | | | | |
|  | | | | | | |