SWØSU
Southwestern Oklahoma State University

SOFTWARE INSTALLATION FORM FOR LABS

Date: _____

This form needs to be turned in with any software needing to be <u>installed</u> or <u>upgraded</u> in the computer labs on campus. Please view the Lab Software Policy:
www.swosu.edu/resources/policies/dept/its/lab-software.asp

Name: _____

Phone: _____

Name of software: _____

Location the software will be used: _____

Semester the software will be used: _____

Software Information

All software being installed requires the following:

- **Original Software Media or software downloaded from the web**
- **Proof of purchase/renewal (unless software is free)**
  (Copy of the Purchase Order)
- **Licensing information**
- **Any documentation, contact information, passwords, or special configurations, being requested**

If for some reason the software will arrive after the times specified below please inform ITS by sending an email to its@swosu.edu.

- **Software to be installed for Summer or Fall needs to be turned into ITS by the 1st day of "Dead Days" of the Spring semester.**
- **Software to be installed for Spring needs to be turned into ITS by the 1st day of "Dead Days" of the Fall semester.**

Is this software installed on any other computer other than lab computers? _____

If so, where is it installed? _____