

REQUEST FOR SPECIAL ORDER - DEPARTMENT APPAREL

Date of Request: _____

REQUESTER INFORMATION

Department:	_____
Contact Name:	_____
Telephone:	_____
E-mail:	_____
Approving Supervisor:	_____

NEED BY DATE: _____

Do you have a design?

- ____ No, I need help designing something
- ____ Yes, I have an image that may need some work
- ____ Yes, I can provide a vector file (PDF, EPS,)

Type of imprint:

- ____ Screenprint
- ____ Embroidery
- ____ Other

If Other, please specify: _____

Color:

- One color _____
- Two-Color _____
- Full Color _____

SIZE	QTY	COLOR	DESCRIPTION - Please be as specific as possible: imprint location, fabric, sleeve length, design, brand and item number (if available)

Attach additional sheet if necessary

I understand that by submitting this form, I am requesting that the Campus Store staff research vendors and best pricing for the items specified above, and that these items will be purchased through the Campus Store and not directly from the vendor. Substitutes for specific brands and item numbers will be made if the substituted items are comparable in quality at a better price. The Campus Store will provide a quote for approval by the department supervisor.

Requestor signature: _____

I have read the procedure for College-provided clothing and understand the guidelines provided. I also understand that it is the responsibility of the department to ensure that this order follows those guidelines, and that any apparel provided to an employee outside of these guidelines becomes taxable to the employee.

Requestor signature: _____