

## Request for Microsoft "Work at Home Rights" Software

Department: \_\_\_\_\_ Date: \_\_\_\_\_

Name of faculty/staff: \_\_\_\_\_

Campus Computer ID: GB \_\_\_\_\_ Interdepartment Delivery Address: \_\_\_\_\_

Employee Type:  Permanent Faculty     Adjunct Faculty     Permanent Staff     LTE

<u>Select</u>	<u>Price</u>
<input type="checkbox"/> Office MAC 2011	\$ 8.00
<input type="checkbox"/> Office 2010 Pro Plus for Windows	\$ 8.00
<input type="checkbox"/> Web Expression Studio V4.0 for Windows	\$ 8.00
<input type="checkbox"/> Visio Professional 2010 for Windows	\$ 8.00
<input type="checkbox"/> Project Professional 2010 for Windows	\$ 8.00
<input type="checkbox"/> Office MAC 2008	\$ 8.00
<input type="checkbox"/> Office 2007 Enterprise for Windows	\$ 8.00

**Total Cost:** \_\_\_\_\_

### Microsoft Campus Agreement Work at Home Acceptance Form

This acceptance form is valid for the Microsoft software products checked above, which shall be referred to collectively herein as the "Software". Software is made available to you because the University of Wisconsin – Green Bay has purchased license coverage for the Software through its Microsoft Campus Agreement effective August 1, 2010. The University of Wisconsin – Green Bay is ordering the right for you to use the Software for **work-related** purposes at home under its Microsoft Campus Subscription Enrollment. **You are not licensed to use the Software at home for personal purposes.** You do not own the license or the CDs, rather you are authorized to use the Software and associated media pursuant to the terms and conditions of the Microsoft Campus Agreement during the licensed period starting August 1, 2010 and ending July 30, 2013. You will be required to remove the Software from your home machine immediately upon expiration of the licensed period or if your employment by the University of Wisconsin – Green Bay ends.

Please initial each statement:

\_\_\_\_\_ I will read and abide by the license agreement(s) associated with this Software.

\_\_\_\_\_ I understand that no technical support is provided by Microsoft in association with work-at-home use.

\_\_\_\_\_ I understand the minimum specifications to run the Software are at <http://www.microsoft.com/products/info>.

\_\_\_\_\_ I will remove the Software from my home machine immediately upon the earlier of  
(a) Expiration of the licensed period specified above or  
(b) The end of my employment by the University of Wisconsin – Green Bay.

\_\_\_\_\_ I understand that I am not licensed to use the Software for personal purposes.

Signature of Faculty/Staff member: \_\_\_\_\_

## Department Approval for Microsoft "Work at Home Rights" Software

Department: \_\_\_\_\_

Chair/Director Signature: \_\_\_\_\_

Billing Contact Person: \_\_\_\_\_

Funding codes for chargeback of costs of CD sets: \_\_\_\_\_

### **Procedures:**

1. Individual faculty/staff member completes this form, initial and sign then submit it to the Chair/Director of your Department.
  2. Department Chair/Director approves spending by signing then forward to Program Assistant.
  3. Program Assistant adds funding codes above and sends order form to Information Services Division (ISD) Office, CL 730.
  4. ISD will mail the CD sets directly to the faculty/staff member. ISD will e-send a chargeback to the billing contact person in the department for the cost of the CD sets.
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### **Tracking Information:**

Eligibility Verified:       Yes       No

### **Chargeback Information:**

Date Processed: \_\_\_\_\_

Amount: \_\_\_\_\_

Chargeback Number: \_\_\_\_\_

Initials: \_\_\_\_\_