**Greene CSD – iPad App Request Form for Paid Apps**

Please complete this request form and forward to your Administrator for review. See the request process and sample below. Remember we can’t process in-apps.

**Your Name:**

**Title of APP Request:**

**App URL:**

**Type of App:** Cost\_\_\_\_\_\_ # of apps\_\_\_\_\_\_\_\_\_

\* Remember there is no in-app purchases.

**iPad name (Settings < General < About < Name):**

\* Remember to find the device name in ***Settings*** under ***About*.** The name will look something like the following: GRMH-IPAD-211-01

\*\* Please be specific so the apps are assigned to the correct iPads\*\*

Signature of Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit as an attachment to a Service Now Ticket for processing.