# WCED PURCHASE REQUISITION

West Central Education District

**Staff Instructions:**

**Complete ALL the blue text boxes electronically.**
**Print and then sign the bottom.**
**Route to your immediate supervisor.**

- By signing this request, the "requester" and "supervisor" acknowledge and assure that said expenditures comply with the District internal controls and state and federal requirements for all categorical expenditures including but not limited to special education.
- In submitting this request for payment, it is attested, subject to penalty of law, that this request is valid and has not been previously paid.

**TODAY'S DATE:** _____ **REQUESTER:** _____

**DATE NEEDED:** _____ **FUNDING CODE:** _____
COMPLETED BY WCED OFFICE

VENDOR: _____ WEB ADDRESS: _____

STREET: _____ PHONE: _____

CITY: _____ FAX: _____

STATE: _____ ZIP CODE: _____

| Item # | Quantity | Part/Catalog/Model # & Description of Item: | Unit Price | Total Price |
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| | | | SHIPPING COST | |
| | | | TOTAL PRICE | |

In the box below, type a statement of need for the above listed items:

➡️COMPLETE BACK OF FORM

| ⬇️COMPLETE THIS SECTION IF THE ITEM(S) ARE FOR SPECIAL EDUCATION⬇️ | |
|---|---|
| **SPECIAL EDUCATION REQUISITION ELIGIBILITY, ALLOWABILITY, & NECESSITY DETERMINATION**<br>Complete the set of questions below depending on the purpose of the materials/supplies (A, B, **OR** C): | |
| **A. STUDENT MATERIALS (answer 1-4)** | |
| 1. Will the materials be used directly by students? | ☐ YES<br>☐ NO |
| 2. Are the materials in addition to those provided to the same students in the mainstream?<br>*For example, the district provides basic textbooks, computers, and other equipment/materials for all students. Similar materials are not eligible for special education reimbursement when provided to students with disabilities regardless of setting.*<br><br>**OR**<br><br>Does the student with a disability require materials specially adapted for the disability in order for the student to benefit from the special education program?<br>*For example, braille texts would be eligible while a basic print text at a different grade level is NOT an adapted text.* | ☐ YES<br>☐ NO<br><br>OR<br><br>☐ YES<br>☐ NO |
| 3. Will students with disabilities be the **primary** and **priority** users of the materials? | ☐ YES<br>☐ NO |
| 4. Are the materials documented in the IEP (if so, attach IEP page(s)) OR are they essential to the special education program? | ☐ YES<br>☐ NO |
| **B. TEACHER MATERIALS** | |
| Will the teacher's manuals and materials be **supplemental** to the general education curriculum? | ☐ YES<br>☐ NO |
| **C. INSTRUCTIONAL or NON-INSTRUCTIONAL SUPPLIES & MATERIALS** | |
| Are the materials specifically instructional in nature? | ☐ YES<br>☐ NO |

**Print, sign, and route**:**

REQUESTER: _____ DATE _____

IMMEDIATE SUPERVISOR: _____ DATE _____

EXECUTIVE DIRECTOR: _____ DATE _____

****Attach receipt and/or order confirmation notification showing expenditure.**

Date Ordered:_____

UPDATED August 2026