iPad App Request

Requested by: _____

Email: _____

Faculty/Staff   Student

					Cost
Ex.	iCommunicate	Primarily pediatric use for autistic clients in CSUEB speech clinic. In addition, to be used as part of a research study on effectiveness of electronic vs. non-electronic alternative communication methods.	Yes	—	$34.99
4					
5					

I approve of this app and request it for our clinic.

_____
Supervisor Signature (if student request)   Date

_____   _____
AAC Advisor Signature   Date   Dept. Chair Signature   Date

Approved _____ Needs followup _____ Downloaded _____ Synced _____ Inventory _____ Notified _____

8/2013