STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
DIVISION OF ENTERPRISE TECHNOLOGY
TECHNOLOGY FOR **E**DUCATIONAL **ACH**IEVEMENT
(TEACH) PROGRAM
TEA-004 (2012)

RETURN REQUEST TO:
TEACH@WISCONSIN.GOV
101 E WILSON ST, 8TH FLOOR
MADISON, WI 53707-7844
PHONE: (608) 261-5054
FAX: (608) 223-7750

TEACH Service Change Request

Site Information		
Site ID (Enter 4-digit Site ID, if known)	Site Name	
Site Street Address	Site City	Zip Code

Primary Contact Information		
Last Name	First Name	
Office Phone Number ( ) -	Cell Phone Number ( ) -	Email Address

Type of Request	
☐ Change or Upgrade existing service	**Note:** Requires minimum of 10 business days if no site work is necessary; otherwise a minimum of 45 business days if construction is needed.
☐ Disconnect service	**Note:** Requires minimum of 5 business days
Requested Due Date	

Type of Service - Please check all that apply		
Service	**Increase Bandwidth To**	**Decrease Bandwidth To**
☐ Internet Transport (ITp)	Mbps	Mbps
☐ WAN	Mbps	Mbps
☐ High Priority Low Latency (HPLL)	Mbps	Mbps
☐ High Priority Low Latency Video Bridging (HPLL VB)	Mbps	Mbps
☐ IP address for each HPLL VB codec		
☐ Standard Definition (SD) Video – requires 4 Mbps of bandwidth		
☐ High Definition (HD) Video – requires 3 Mbps of bandwidth		

Provide a brief description and justification for this service change request. Include usage statistics graphs if requesting an increase to Internet Transport.

TEACH Program Use Only			
Change Request Status	☐ Approved	☐ Denied	☐ Usage statistics graphs
Comments			
TEACH Administrator			

This document can be made available in alternate formats to individuals with disabilities upon request.
Incomplete requests may be returned and may experience delays in processing time.