HENLEY HIGH SCHOOL

INTERNAL REQUISITION FORM FOR ORDER OF GOODS/ SERVICES 2024

**1. SUPPLIER DETAILS :**

# Supplier Name : .. . . . . . . Phone : . . . . . . . . . . . . . . . . . .

# Address : .. . . . . . . . . . . . . . . . Fax : . . . . .. . . . . . . . . . . . .

# : . . .. . .. . . . . . . . . Post Code : . . . .. . . . Date :. . . . . . . . . . . .

## 2. ORDER DETAILS : To be completed in full

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Description | **Supplier Product Code** | Qty | **Unit Cost $** | **Total Cost $** | **Account Code or Curriculum Area ( eg E-CEE-7121 )** |
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| **COVID19 Vac status provided - YES / NO** | **NO** |  |  |  |  |
| **\*WWCC Required – YES / NO**  **\*WWCC=YES: eg. Service Provider/Contractor is working with students with potential for ongoing contact/opportunity to form relationship and more than one-off session.** | **NO** |  |  |  |  |
| **FREIGHT/PICKUP: (PLEASE CIRCLE AND IF BEING DELIVERED INCLUDE THE COST)** |  |  |  |  |  |
| **GRAND TOTAL** | **GST INC/EXC (Please circle)** |  | **$** |  |  |

**3. RISK MANAGEMENT DECLARATION AND ORDER AUTHORISATION**

**A risk assessment of the above items has been carried out and control measures implemented. A SDS has also been obtained and read. Refer to Risk Assessment process on the reverse on this document.**

**Budget Manager :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Budget Manager Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Requested by (if you are not Budget Manager): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#### THIS IS NOT AN OFFICIAL SCHOOL PURCHASE ORDER

**EDSAS Details** : Order No . . . . . . . . . . . . . Date Entered : . . . . . . . . . . . . . . Initials : . . . . . . . . .

