



Section 1 - General Information

a. State Entity Name:		b. Submission Date:	
c. Contact First and Last Name:		d. Contact Title:	
e. Contact Email:		f. Contact Phone:	
g. Estimated Cost:		h. Proposed Acquisition Method:	
i. Does the acquisition include any GenAI technology?	<input type="checkbox"/> Yes – Seeking CDT consultation and assessment for new GenAI technologies <input type="checkbox"/> Yes – Seeking to amend an already completed CDT consultation and assessment for GenAI technology. Provide CDT consultation or assessment number: _____ <input type="checkbox"/> No – This procurement does not contain GenAI technology		
j. Description of Acquisition:			

Section 2 – Procurement Authority (select one option below)

<input type="checkbox"/>	This acquisition is subject to the California Department of Technology's procurement authority because it is related to a new or active non-delegated IT project (meets one or more of the criteria listed in SAM Section 4819.37) and either exceeds the state entity's assigned DGS/PD Delegated Purchasing Authority dollar threshold <u>OR</u> the acquisition is exempt from DGS oversight. Provide the California Department of Technology Project Number:
<input type="checkbox"/>	This acquisition is subject to the Department of General Services' procurement authority because it is NOT related to a new or active non-delegated IT project (does NOT meet one or more of the criteria listed in SAM Section 4819.37) and exceeds the state entity's assigned DGS-PD Delegated Purchasing Authority dollar threshold.
<input type="checkbox"/>	This acquisition is subject to the state entity's procurement authority because it is within the state entity's assigned DGS-PD Delegated Purchasing Authority dollar threshold <u>OR</u> the acquisition is not related to a non-delegated IT project and exempt from DGS oversight.

Section 3 – Certification

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	1. The signatory confirms that the acquisition described herein complies with the criteria and procedures for IT prescribed in SAM Section 4819.41 Certification of Compliance with IT Policies.
<input type="checkbox"/>	<input type="checkbox"/>	2. The signatory confirms that the acquisition described herein meets the requirements of Government Code 11135 applying Section 508 of the Rehabilitation Act of 1973 as amended or qualifies for one or more exceptions.

<input type="checkbox"/>	<input type="checkbox"/>	3. The signatory confirms that the procurement authority for this acquisition is accurately noted in Section 2 of this form.
<input type="checkbox"/>	<input type="checkbox"/>	4. The signatory confirms that the acquisition described herein is excluded from the Department of Technology's IT Project Submittal and Approval Authority because it is excluded under SAM 4819.32.
<input type="checkbox"/>	<input type="checkbox"/>	5. The signatory confirms that the acquisition described herein contains a GenAI technology function or service and meets the requirements of the State of California GenAI Guidelines for Public Sector Procurement, Uses, and Training.

<div> <div>_____</div> <div>Chief Information Officer (CIO) (Print Name)</div> </div> <div> <div>_____</div> <div>CIO Signature/Designee</div> </div> <div> <div>_____</div> <div>Date</div> </div>		
<div> <div>_____</div> <div>¹Agency Information Officer (AIO) (Print Name)</div> </div> <div> <div>_____</div> <div>AIO Signature/Designee</div> </div> <div> <div>_____</div> <div>Date</div> </div>		

DGS/PD or CDT Use Only				
Agreement #		Inter-Agency Agreement #	LTB/NCB/SCR Justification #	Purchase Estimate #

¹ AIO approval is only required for Agency-affiliated state entities with an IT acquisition cost that exceeds the state entity's Department of Technology Project Cost Delegation or \$1 million, whichever is lower.