

REQUEST FOR ROM/QUOTE

Please answer all questions below and submit completed form to the contracting office to obtain a quote from Mass Virtual, Inc.

Career Field:

- Aircraft & Flight
- Ground Vehicle
- Maritime
- Emergency Management & Response
- Health/Medical
- Special Mission
- Security
- Other:

Name of Task/Procedure:

If training is related to a specific MDS, vehicle or platform please provide full name and description:

Provide a short description of any type of task (i.e. maintenance, operations, etc.) of training needed:

Content Requested:

- Virtual Reality
- Augmented Reality
- Mixed Reality
- Other: _____

Users:

- Individual
- Multi-user

Type of Platform:

- Desktop
- Tablet
- Mobile VR/AR
- Other: _____

Will hardware be needed?

- Computers How many: _____
- Headsets How Many: _____
- Sanitation Equipment
- Other: _____

Overview of T.O. procedure/process:

List technical order reference along with all chapter, sections and/or tasks to be performed:
-If possible, attach T.O. with referenced sections/steps.

What is the environment that the procedure is performed in (i.e. in a building, in a deployment area or hangar environment or on the flight-line, etc.)?

If applicable, in which specific area(s) on the vehicle does the procedure take place?

Approximately how many combined steps does the procedure contain?

Actual time to complete procedure:

List of any tools and/or equipment that are used as part of this procedure:

How many personnel are required to complete the procedure?

Does the configuration of the vehicle or equipment change during performance of this procedure?
If so, how? (Example: the movement or change of any component including power on/off state.)