

PRODUCTION SCHEDULING REQUEST

Requested By:		Email request to: Tawasol GSM App Support@stc.com.sa	
Request Name:		Contact Phone:	
Brief Description of Request:		Contact Email:	
		Request Date:	
		Machine: Production	
External Reference:	NONE	Frequency: daily=1,weekly=2,monthly=3,once=4,biweekly=5,bimonthly=6	4
Menu Path (if applicable):	NONE	Severity: SEV1 = Emergency, SEV2 = Priority, SEV3 = Routine	1
Retention Period, and Justification if Request is for a Save/Restore			
Tape Numbers:			
Dependency:			
A/Hrs Callout:	None		
Output & Reports:			

For Operations use:

RECEIVED BY SCHEDULER : _____ Date:____/____/____
Authorization must be approved and signed for production request to be actioned.

Authorized By: _____ Date:____/____/____

JOB ID: _____ START DATE : _____ END DATE : _____

Carried out By: _____ START TIME : _____ END TIME : _____