| SYSTEMS CHANGE REQUEST FORM   |                |   |                     | Swaziland<br>Electricity<br>Company |  |
|---|----------------|---|---------------------|-------------------------------------|--|
| System: Quality Management System   |                | Reference No, Revision No;<br>Q-F-IT-F-02, Rev1 |                     | Originated by: IT Manager           |  |
| Revision Date:  | Page No:       |   | Authorized by:      |                                     |  |
| 11.06. 2013   | Page 1 of 1    |   | Managing Direc      | etor                                |  |
|   |                |   |                     |                                     |  |
| 1.) SUBMITTER - GENER   | RAL INFORMATIO | )N  |                     |                                     |  |
| Type of Change Request  | ☐ Enhancement  | ☐ Defect  | ☐ New               |                                     |  |
| Program Type  | Program        | Patch   | Report [            | Infrastructure                      |  |
| Employee Name   |                |   |                     |                                     |  |
| Brief Description of Request  |                |   |                     |                                     |  |
| Date Submitted  |                |   |                     |                                     |  |
| Date Required   |                | 1   | 1                   |                                     |  |
| Priority  | Low            | Medium  | High                | ☐ Mandatory                         |  |
| Reason for Change   |                |   |                     |                                     |  |
|   |                |   |                     |                                     |  |
| Approval Signature  2.) IT IMPLEMENTER - I  | NITIAL ANALYSI | (S  | Date Signed         |                                     |  |
| 2.) IT IMPLEMENTER - I Estimated Impact   | NITIAL ANALYSI | īS  | Date Signed         |                                     |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time  |                |   |                     | Disastrous                          |  |
| Approval Signature  2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments   | NITIAL ANALYSI | S Medium  | Date Signed         | Disastrous                          |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact  |                |   |                     | Disastrous                          |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments Recommendations   |                |   |                     | Disastrous                          |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments   | Low            | ☐ Medium  Approved with                         | High                | Disastrous  More Info               |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments Recommendations Signature  3.) IT Manager – DECISIO Decision                                    | Low            | Medium  | ☐ High  Date Signed |                                     |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments Recommendations Signature  3.) IT Manager – DECISIO Decision Decision Date                      | Low            | ☐ Medium  Approved with                         | ☐ High  Date Signed |                                     |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments Recommendations Signature  3.) IT Manager – DECISIO Decision Decision Date Decision Explanation | Low            | ☐ Medium  Approved with                         | ☐ High  Date Signed |                                     |  |
| 2.) IT IMPLEMENTER - I Estimated Impact Estimated Time Risk Impact Comments Recommendations Signature  3.) IT Manager – DECISIO   | Low            | ☐ Medium  Approved with                         | ☐ High  Date Signed |                                     |  |