

WORKSTATION SETUP FORM

<u>System:</u> Quality Management System	<u>Reference No. Revision No:</u> Q-F-IT-F-07, Rev1	<u>Originated by:</u> Systems Administrator
<u>Revision Date:</u> 17.01.2014	<u>Page No:</u> Page 1 of 1	<u>Authorized by:</u> IT Manager

SECTION 1: Employee (To receive workstation) Information

Employee Name:	PF Number #:
Department:	Depot:

SECTION 2: Computer (To be Set Up) Information

Computer/Laptop Make:	Model:
Serial #:	OS:
Purchase Date:	Location:

SECTION 3: Computer Setup Information (Please tick)

Software	Installation
<input type="checkbox"/> Ellipse	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Eclipse Enterprise Edition (3E)	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Credit Billing System (SPS)	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Novel	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Outlook email Setup	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Proxy Setup	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> BitDefender	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Assigning an IP	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Other Systems	Access Level Profile

SECTION 4: Workstation Setup Confirmation (Implementer)

System Administrator: *I confirm that I have installed all the required software and access for the above indicated employee for the computer systems indicated above*

Signature:_____ **Date:**_____