

# Temporary File Upload System

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## Change Request Form # [n]

### Request Date

[date change requested]

### Change Request Description

[briefly describe the requested change]

### Estimated Time Impact

[brief description of what time impact the request will have on the project]

### Estimated Budget Impact

[brief description of what budget impact the request will have on the project]

### Resolution

[description of recommended resolution purposed]

### Signatures

By signing this document you certify that this change request and its purposed resolution have been approved and are to be integrated into the system design by the Project Team.

\_\_\_\_\_  
[name]  
[position, company]

\_\_\_\_\_  
Date

\_\_\_\_\_  
Connor Oliver  
Project Manager

\_\_\_\_\_  
Date