**213 VSR eCase Change Request Form**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Requestor** |  | | **Date Requested** | | |  | |
| **eCase POC email** | Larry.Edwards3@va.gov | | **Date Required** | | | Click here to enter a date. | |
| **eCase** |  | |  | | |  | |
| **Priority** | Urgent/Imperative | | Regular/Improvement | | |  | |
| **Please identify which specific eCase requires an update: Choose an item.** | | | | | | | |
| **Please indicate which material(s) require a change:** | | | | | | | |
| eCase Complete Documents | Answer Key | | Trainee Instructions | | | eCase Automatic Feedback | |
| **Please indicate why this change is necessary?** | | | | | | | |
| Manual/Regulation change | Error trend | | Typo | | | Other | |
| **Please identify exactly where the content is located: 21-526EZ** | | | | | | | |
| Page number(s): | Form name(s)/type(s): | | Block #’s: | | | Question #/name: | |
| **Please identify exactly what is incorrect or needs to be changed, with references:** | | | | | | | |
|  | | | | | | | |
| **Please identify what correction is required (solution), with references:** | | | | | | | |
|  | | | | | | | |
| ***Please continue on Page 2 with additional changes needed on the same case.*** Please expand the document as needed to provide specific location of content, identification of issue, and resolution; for each identified issue requiring change. | | | | | | | |
| **Please identify exactly where the content is located: 686c** | | | | | | | |
| Page number(s): | | Form name(s)/type(s): | | Block #’s: | Question #/name: | |
| **Please identify exactly what is incorrect or needs to be changed, with references:** | | | | | | | |
|  | | | | | | | |
| **Please identify what correction is required (solution), with references:** | | | | | | | |
|  | | | | | | | |
| **Please identify exactly where the content is located: Trainee Instructions** | | | | | | | |
| Page number(s): | | Form name(s)/type(s): | | Block #’s:  Click here to enter text. | Question #/name:  Click here to enter text. | |
| **Please identify exactly what is incorrect or needs to be changed, with references:** | | | | | | | |
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| **Please identify what correction is required (solution), with references:** | | | | | | | |
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Additional updates: