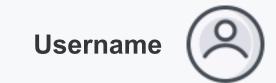
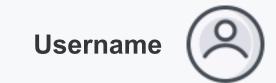


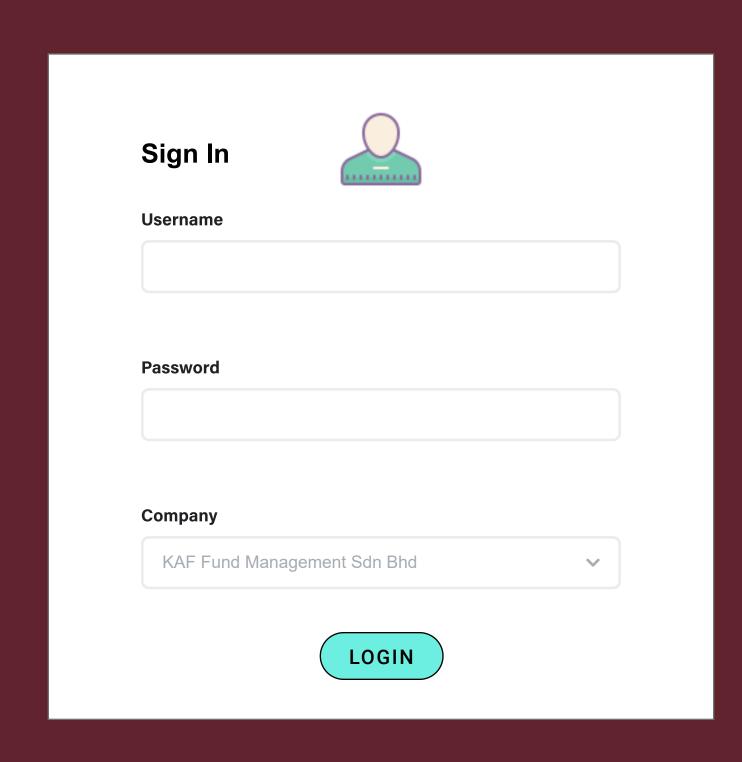
LAN Id:  Id  Password:
Password:
Password
Confirm Password:
Password



Email Address:	
Email	
Password:	
Password	
Confirm Password:	
Password	



XXXXXXXXXXXXXXXX	
Name:	
Name	
Department:	
Department	
Designation:	
Designation	



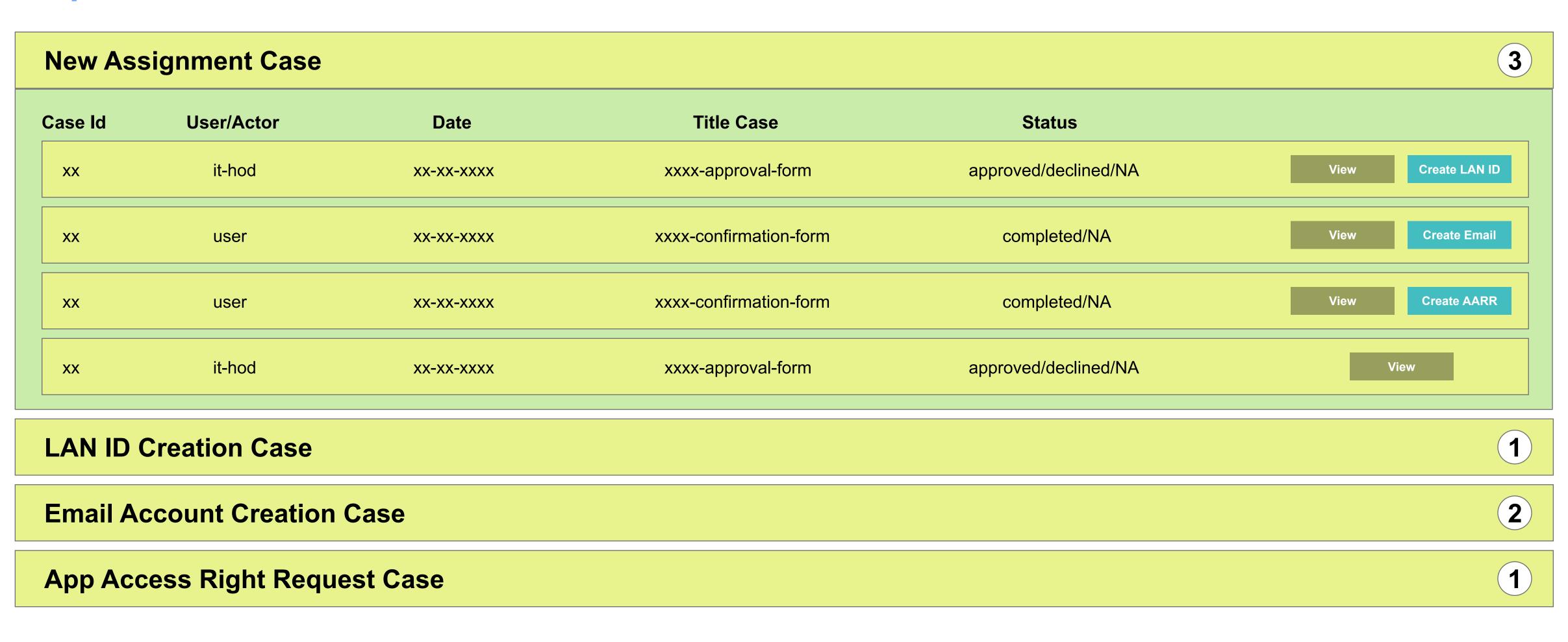


# Helpdesk Quick Case View

New Assignment Case3LAN ID Creation Case1Email Account Creation Case2App Access Right Request Case1



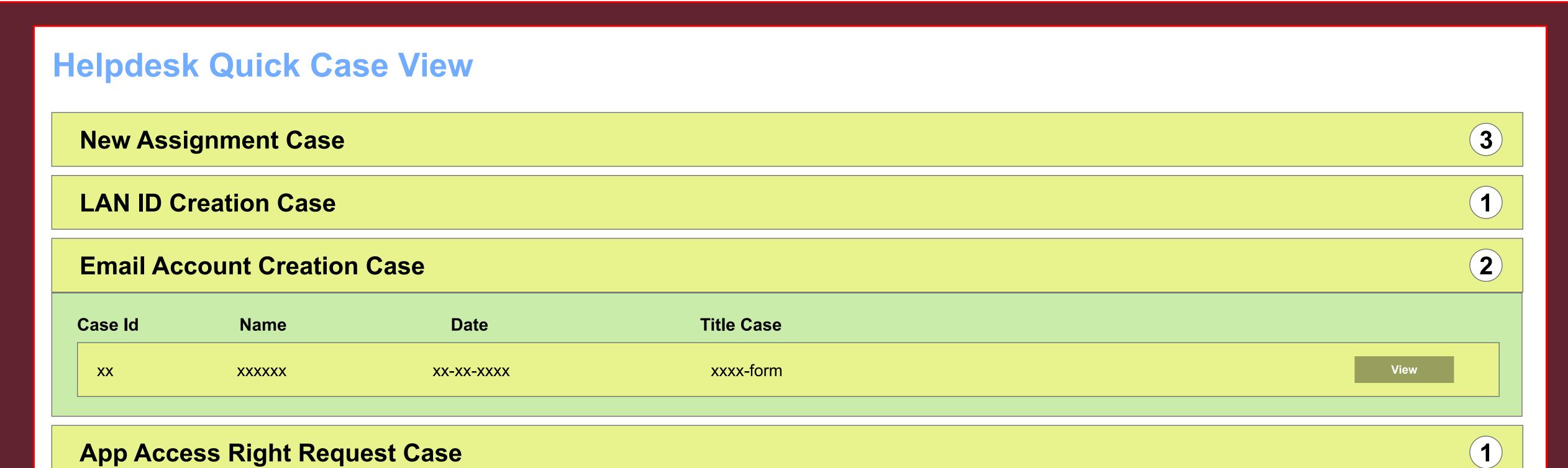
# Helpdesk Quick Case View





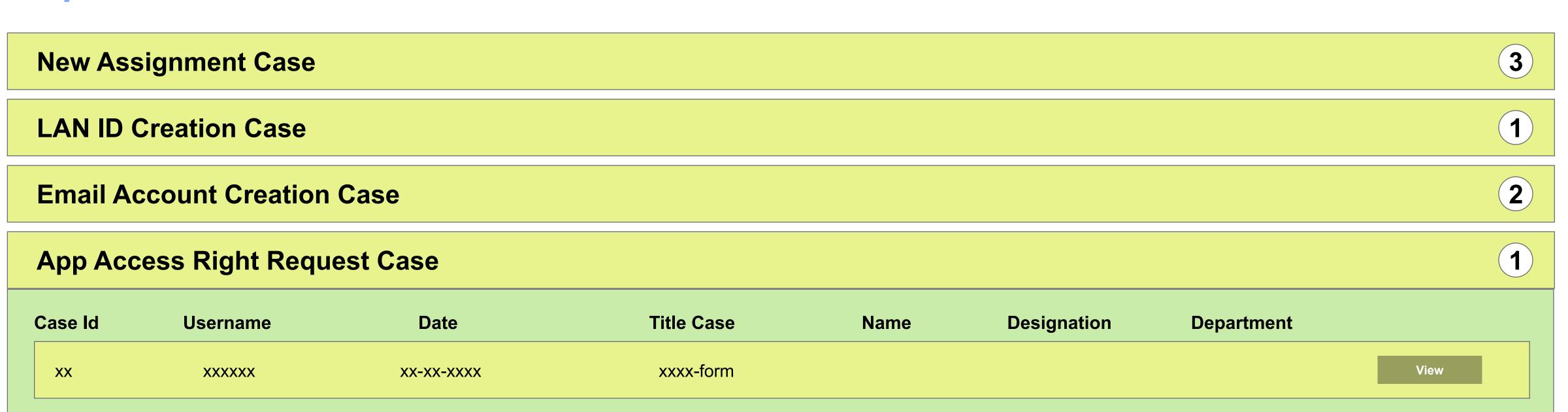












NEW FORMS +



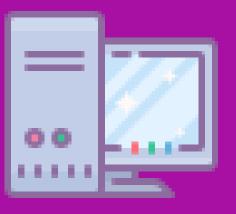
REPORTS



SIGN OUT











NEW LAN ID FORM

NEW EMAIL ACCOUNT FORM

NEW APP ACCESS RIGHT REQUEST FORM



#### APPROVAL FORM CASE DETAIL

Case id: XXXXX

**User/Actor: XXXXX** 

Date: XXXXX

Title: New Staff Onboarding and LAN ID Approval

## **Description:**

Lorem ipsum dolor sit amet, per voluptua efficiendi ea, ea ius lorem dicit. Ex vis bonorum blandit scaevola, numquam definiebas nec ei, dolore iudicabit evertitur cu per. Eos an omnesque intellegebat, legere facilisi sit no, paulo ubique appareat eu eum. Duo nostro lucilius corrumpit an. Usu id iisque dissentias, iusto iracundia eos no.

#### **Details:**

Name: xxxxxxx

Designation: xxxxxxx Department: xxxxxxx

Head of Department: xxxxxxx

Status:

APPROVED



# LAN ID CREATION CASE DETAIL

Case id: XXXXX

Helpdesk name: XXXXX

Date: XXXXX

Title: XXXXX

LAN ID: XXXXX

Password: XXXXX



#### APPLICATION ACCESS RIGHT REQUEST CASE DETAIL

Case id: XXXXX

Helpdesk name: XXXXX

Date: XXXXX

## **Description:**

Lorem ipsum dolor sit amet, per voluptua efficiendi ea, ea ius lorem dicit. Ex vis bonorum blandit scaevola, numquam definiebas nec ei, dolore iudicabit evertitur cu per. Eos an omnesque intellegebat, legere facilisi sit no, paulo ubique appareat eu eum. Duo nostro lucilius corrumpit an. Usu id iisque dissentias, iusto iracundia eos no.

Name: XXXXX

**Designation: XXXXX** 

**Department: XXXXX** 



## APPROVED OR DECLINED FORM CASE DETAIL

Case Id: XXXXX				
User/Actor: XXXXX				
Date: XX-XX-XXXX				
Title: Application Access Right Requ	iest Form			
Details:				
Name: xxxxxxx  Designation: xxxxxxx  Department: xxxxxx  SERVICE REQUIRED  App1 App2 App3 App4 App3 App4 App5 App6  Date approved:  HOD signature  O1/01/2019				