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Change Request Form

Van Lang Admissions

# Revision Table

|  |  |  |  |
| --- | --- | --- | --- |
| **Author** | **Date** | **Reason for changes** | **Version** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Table of Contents

[Revision Table 1](#_Toc465028273)

[1. INTRODUCTION 3](#_Toc465028274)

[1.1. Purpose 3](#_Toc465028275)

[1.2. Audience 3](#_Toc465028276)

[2. Change Request Form 3](#_Toc465028277)

# INTRODUCTION

## Purpose

## Audience

The intended audiences of the Change Request Form are

|  |  |
| --- | --- |
| **Intended Audience** | **Description** |
|  |  |
|  |  |

# Change Request Form

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Change Request** | | | | |
| **CR#** | [CR001] | | | |
| **Type of CR** | Enhancement | Defect |  | |
| **Project/Program/Initiative** |  | | | |
| **Submitter Name** |  | | | |
| **Brief Description of Request** | [Enter a detailed description of the change being requested] | | | |
| **Date Submitted** | (dd/MM/yyyy) | | | |
| **Date Required** | (dd/MM/yyyy) | | | |
| **Priority** | Low | Medium | High | Mandatory |
| **Reason for Change** | [Enter a detailed description of why the change is being requested] | | | |
| **Other Artifacts Impacted** | [List other artifacts affected by this change] | | | |
| **Assumptions and Notes** | [Document assumptions or comments regarding the requested change] | | | |
| **Comments** | [Enter additional comments] | | | |
| **Attachments or References** | Yes | No |  | |
| **Link:** | | | |