

Information Technology Services
Change Management Request Form

Change Description/ Change Request Filename:			
HDO/Change Request No.:	150	Project:	
Requested by:		Date:	
Department/ location		Telephone:	
Description of the change:			
Change needed by (date):			
Reason for the change			
Requestor Sign off:	Harvey Jones, Head of Law Department		
Approval of Request:	Melissa Smith, CorpLaw Dev Team Leader		
Change Impact Evaluation			
Change Type	Application		Database
	Hardware		Procedures
	Network		Security
	Operating System/Utilities		Schedule Outage
Change Priority	Urgent	Change Impact	Minor
	High		Medium
	Medium		Major
	Low		
Environment(s) Impacted:			
Resource requirements: (personnel , h/w, s/w)			
Test Plan Description			
Rollback Description	.		
Change Approval or Rejection			
Change Request Status	X	Accepted	Rejected
Comments:			
Change scheduled for (date):	2/7/2022		
Implementation assigned to (names): Rex Johnson			
Change Control Committee Sign off:	Harvey Jones, Head of Law Department		
Change Implementation			
Staging test results:			
Pass			
Implementation test results:			
Pass			
Date of Implementation	2/7/2022		
Implementer Sign Off	Rex Johnson	Date	2/7/2022