

JFXC1042

IT Installation/ Repair Request Form

Date of Request

2022-10-26

JANET DINOLONG
SIGNATURE

Local Supervisor/Manager

JUN KIKUCHI
SIGNATURE

Japanese Department Manager

Name: ANALYN GOMEZ (STAFF)

I.D No. 12079

PC Name/No:

Div/Dep't: M-PRO / M-PRO

Type of Installation

☒ (Entry)
(For Install)
 ☐ (Exit)
(For Deletion)
☐ R-Pics System☐ Cybozu/Garoon☒ E-Mail☐ Active Directory☐ Siam System☐ Data Surfing
☐ Change of PC User
previous user/I.D No.: _____ current user/I.D No.: _____

☐ File Server Drive
(specify) _____ (purpose) _____

☐ Transfer of PC
from dep't _____ to dep't _____

☐ Software
(specify) _____ (purpose) _____

☐ Others
(specify) _____
☐ Firewall Policy

(Select Policy Level Number) (3) Select from 1, 2, 3, 4

Reason for Application Application for new staff of M-PRO and accessing the internet for reference
in making of reports.

Policy Validity Period

Date From (yyyy/mm/dd)

Date To (yyyy/mm/dd)

Note: Do not fill-up Validity Period if Permanent

Requests Performed by: ORVINE FXUL ALMAGRO
IT MEMBER2023-01-25
Date and Time of Execution

Document No.	TCF-G022	Ver.	3	TOYOFLEX CEBU CORPORATION	Retention Period
Effectivity Date	2021-04-15	Prepared by:	Checked by:	Approved by:	2 YEARS
		SUSETTE SURBANO	REY DAGATAN/AMADITO ORTIZANO	TAKAFUMI MATSUNAGA	