

# IT Installation/ Repair Request Form

Date of Request

2022-12-09

2022-12-09  
Dessa Ouano  
SIGNATURE

Prepared By:

2022-12-09  
Lui Restauro  
SIGNATURE

Local Supervisor/Manager

2022-12-09  
Hiroya Hamaguchi  
SIGNATURE

Japanese Department Manager

Name of User Rodgin Grace Regencia

I.D No. 9454

PC Name/No: TFXC0950

Div/Dep't: QA/QA

Position: QA Junior Staff

Select the purpose of Application	<input type="checkbox"/> For New PC Issuance Request	<input type="checkbox"/> (For PC replacement request) <small>If you check here, attached the signed TFJ-S15-G030 form</small>	<input checked="" type="checkbox"/> System Registration and Job Request
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## (Systems Registration and Job Requests)

<input type="checkbox"/> Cybozu/Garoon	<input checked="" type="checkbox"/> Wireless Network
<input checked="" type="checkbox"/> E-Mail	<input checked="" type="checkbox"/> LAN Cable Assembly/Installation
<input type="checkbox"/> Domain ID	<input checked="" type="checkbox"/> MS Teams Account
<input type="checkbox"/> PC Reset/Reformat	<input type="checkbox"/> Documentum/Astrux System
<input type="checkbox"/> SAP	<input type="checkbox"/> Toss System
<input type="checkbox"/> Change of PC User previous user/I.D No.: _____ current user/I.D No.: _____	
<input checked="" type="checkbox"/> File Server Drive (specify) <u>Medical Factory</u> <u>Medical Group</u>	View important files necessary for QA related documents
<input type="checkbox"/> Transfer of PC from dep't _____ to dep't _____	
<input checked="" type="checkbox"/> Software (specify) <u>MS Office Tools</u>	(purpose) <u>To generate the QA report</u>
<input type="checkbox"/> Others (specify) _____	

## Firewall Policy

(Select Policy Level Number) ( 3 )

Select from 1, 2, 2A, 3, 3A

Reason for Application Change MS TEAMS from Guest to Local

N/A

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:

IT MEMBER

Date and Time of Execution

Related Document: TCT-G007

Document No.	TCF-G022	Ver.	4	TOYOFLEX CEBU CORPORATION	Retention Period
Effectivity Date	2022-10-27	Prepared by:	Checked by:	Approved by:	2 YEARS
		REY DAGATAN	AMADITO ORTIZANO	TAKAFUMI MATSUNAGA	