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| --- | --- | --- | --- | --- | --- |
| **TOMS WORLD PHILIPPINES** | | | | | |
| **QMS**  **(Quality Management System)** | **Procedure** | **IT Operations and Support** | | Document No. | ITSD-SWO-01 |
| **Title** | **Service Work Order – Support Services** | | Revision No. | 0 |
| Effectivity Date: | December 2022 |
| **SERVICE WORK ORDER #**  (SWO-STORECODE-DDMMYY) | | | **SWO-\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_** | | |
| **Requested by** | | |  | | |
| **Location / Mall / Area** | | |  | | |
| **Request Date** | | |  | | |
| **Primary Concern** | | | *(Please input detailed concern & attach pictures if needed)* | | |
| \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*Do NOT Fill up this section \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*  To be Fill Out by Division IT / Area IT (Assessor) | | | | | |
| **Evaluate Concern** | | | *(Input Findings / Reason)* | | |
| **Support System** | | | (**X**) Email / Phone Call  (**X**) Remotely  (**X**) Onsite Visit | | |
| **Solutions** | | |  | | |
| **Priority Level** | | | (**X**) Critical (**X**) High (**X**) Medium (**X**) Low | | |
| **Schedule Visit** | | |  | | |
| **Expected Date of Completion** | | |  | | |
| **Total Man Days / Man Hours** | | |  | | |
| **Allocated Budget**  (Transportation, Accommodation, Meal, etc.) | | |  | | |
| **STATUS** | | | (**X**) Resolved (**X**) Pending (**X**) Forward to HO (**X**) Replacement | | |
| **REMARKS** | | |  | | |

Requested by: Performed by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
(Signature over printed name) (Signature over printed name)   
Position / Location Division IT / Area IT / IT Ops