

Capital One Change Request Form

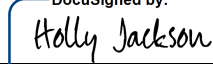
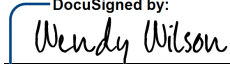
CR024			
<ul style="list-style-type: none"> This form is to be used for all Change Requests between Capital One and the Managed Services Provider. This form is intended for on-line use. Each form field will expand to accommodate the necessary information. 			
To Be Completed by Requestor/Manager			
Requestor	Amit Sonnilal	Phone (416) 816-7639	E- mail amit.sonnial@capitalone.com
Capital One Manager	Alex Thomka	Phone (437) 235-4114	E- mail alex.thomka@capitalone.com
Initiated By	Capital One Request <input checked="" type="checkbox"/> Supplier Request <input type="checkbox"/>	Capital One Call Type	
Change To	Scope/SOW, including Pricing <input checked="" type="checkbox"/>	Application <input type="checkbox"/>	Documentation <input type="checkbox"/>
	Training <input type="checkbox"/>	Special Project <input type="checkbox"/>	Other <input type="checkbox"/>
	Call Duration Change <input type="checkbox"/>	Staffing - not included in monthly staffing forecast (must complete Staffing Section, below) <input type="checkbox"/>	
	Call Volume <input type="checkbox"/> Volume Decrease:		
Name of Change	Quality Score Addition for Customer Application Support Teaam (CAST)		
Description of Change	<p>1. Capital One and Concentrix have agreed to include the following Quality Score metrics to ensure compliance. In the THIRD REVISED AND RESTATED STATEMENT OF WORK NO. CW80384, ANNEX 2-A TO EXHIBIT 2 "SERVICE LEVELS, PERFORMANCE INCENTIVES AND SERVICE LEVEL CREDITS FOR CUSTOMER SERVICE" the following will be appended to Section 4.3 Customer Application Support Team (CAST):</p> <p>(c) Quality Score</p> <p>(i) The Measurement Period for Quality Scores shall be monthly.</p> <p>(ii) (ii) Supplier must attain a score of "3" (or its equivalent) on 95% of the internal quality checks completed by Supplier.</p>		
Supplier Comments (other business impacts)			
Justification for Change	Quality Score detail included in section 4.3 to ensure compliance requirements for Capital One are met.		
Schedule	Request Date: June 1, 2019		
Type	Temporary	Permanent	X
Service Location	City: Moncton	State/Province: NB	Country: Canada
Associated Costs			
Equipment Costs	NA		
Other Costs	NA		
Additional Staffing Requirements			
Staffing Type	Per Incident CA <input type="checkbox"/>		Project Hourly Positions <input type="checkbox"/>
	# of Positions (if applicable)	<input type="checkbox"/>	# of Positions
	Start date		Start date
	Day Shift <input type="checkbox"/>		End date
	After Hours <input type="checkbox"/>		# for Day Shift

NOTE: a MAC request must also be completed for new hires.		# for After Hours
Position Requirements (check all applicable)		
<input type="checkbox"/> Sales queue	<input type="checkbox"/> Phone Support	<input type="checkbox"/> U.S. Citizens Only
<input type="checkbox"/> Customer Relations queue	<input type="checkbox"/> e-Mail Support	<input type="checkbox"/> Canadian Citizens Only
<input type="checkbox"/> Contact Administrator	<input type="checkbox"/> Chat Support	<input type="checkbox"/> Philippines Citizens Only
<input type="checkbox"/> Project Work	<input type="checkbox"/> Web Support	<input type="checkbox"/> Multi-Lingual (List Languages needed) English and French
<input type="checkbox"/> Other (Describe in Comments)	<input type="checkbox"/> Token Processing	<input type="checkbox"/> Security Clearance (describe in Comments)
<input type="checkbox"/> off phone support to front line		
Staffing Comments	Not Applicable	
Special Requirements		
Hardware Products Supported	Not Applicable	
Software Products Supported	Not Applicable	
Required Skills	Not Applicable	
Required Certifications	Not Applicable	
Required Professional Experience / Tenure	Not Applicable	
Required Tasks to be performed	Not Applicable	
Application/Industry Knowledge Required	Not Applicable	

APPROVED AND AGREED TO:

Capital One

Concentrix Technologies Services (Canada) Limited

<p>DocuSigned by:</p> <p></p> <p>18937080960D444</p> <p>Capital One Authorized Representative (Signature)</p> <p>Holly Jackson</p> <p>Capital One Authorized Representative (printed name)</p> <p>June 11, 2019</p> <p>Date</p> <p>Vice President, Card Operations</p> <p>Title</p>	<p>DocuSigned by:</p> <p></p> <p>449612430489607</p> <p>Concentrix Authorized Representative (Signature)</p> <p>Wendy Wilson</p> <p>Concentrix Authorized Representative (printed name)</p> <p>June 11, 2019</p> <p>Date</p> <p>Director, Corporate Counsel</p> <p>Title</p>
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