**Savan Vegas IT Change Form v1.2 (IT104)** (Note this is for planned changes. IT113 is used for Emergency Changes)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **SUBMITTER GENERAL INFORMATION** | | | | | | | | | | | | | |
| **Change Request #** |  | | | | | | |
| **Type of CR** | Enhancement | | | Defect | |  | |
| **Project/Section** | *Create new program for Clinic* | | | | | | |
| **Submitter Name** | Phonemelar Tanvongphab | | | | | | |
| **Brief Description of Request** | *The old program is not enough function to use* | | | | | | |
| **Date Submitted** | *26/03/2019* | | | | | | |
| **Date Required** | *26/03/2019* | | | | | | |
| **Priority** | Low | | | Medium | | High | | | | Mandatory | |
| **Reason for Change** | *The old program is not support for the many thing changed from Norming system* | | | | | | |
| **Other System Impacted?** | STAFF | | | | | | |
| **Backups/Reversion Plan** | *We have backup for the previous version on software$* | | | | | | |
|  |  | | | | | | |
| **Assumptions and Notes** |  | | | | | | |
| **Comments** |  | | | | | | |
| **Attachments or References** | Yes | | | No | |  | |
| **Link:** | | | | | | |
| **Approval Signature** |  | | | | | **Date Signed** | | | | *26/03/2019* | |
| **2.) PROJECT MANAGER - INITIAL ANALYSIS** | | | | | | | | | | | | | |
| **Date and Hour of Initial Impact** | | | 24/02/2019-26/03/2019 | | | |  | | | | | | |
| **Duration Impact** | | | 30 day | | | |  | | | | | | |
| **Schedule Impact** | | |  | | | |  | | | | | | |
| **Cost Impact** | | |  | | | |  | | | | | | |
| **Comments** | | |  | | | | | | | | | | |
| **Recommendations** | | |  | | | | | | | | | | |
| **Approval Signature** | | |  | | | | **Date Signed** | | | | *26/03/2019* | | |
| **3.) CHANGE CONTROL – DECISION** | | | | | | | | | | | | | |
| **Decision** | | Approved | | | Approved with Conditions | | | | Rejected | | | | More Info |
| **Decision Date** | |  | | | | | | | | | | | |
| **Decision Explanation** | |  | | | | | | | | | | | |
| **Conditions** | |  | | | | | | | | | | | |
| **Approval/Rejected Signature (needs IT Director to approve)** | |  | | | | | | | **Date Signed** | | | | *26/03/2019* |