First Normal Form

Department

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dept# | Department Name | Location | Mgr Name | Mgr ID No | Tel Extn |

Customer

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cust# | Dept | Cust Name | Date of Complaint | Nature of Complaint |

Second Normal Form

Department

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dept | Department Name | Location | Mgr Name | Mgr ID No | Tel Extn |

Complaint

|  |  |  |  |
| --- | --- | --- | --- |
| Cust# | Dept | Date of Complaint | Nature of Complaint |

Customer

|  |  |
| --- | --- |
| Cust# | Cust Name |

Third Normal Form

Department

|  |  |  |  |
| --- | --- | --- | --- |
| Dept | Department Name | Mgr ID No | Tel Extn |

Manager

|  |  |
| --- | --- |
| Mgr Name | Mgr ID No |

Complaint

|  |  |  |  |
| --- | --- | --- | --- |
| Cust# | Dept | Date of Complaint | Nature of Complaint |

Customer

|  |  |
| --- | --- |
| Cust# | Cust Name |