De La Salle University
INFORMATION TECHNOLOGY SERVICES OFFICE

SERVICE REQUEST FORM

Please accomplish in duplicate.

Section A1 : Type of service requested *(please check)*

- ☐ Access regulation / permission
- ☐ Activation / Deactivation of MyLasalle account
- ☐ Add / remove email address in mailing list
- ☐ Computer lab management
- ☐ Computer Set-up
- ☐ Creation / Deletion of mailing list

- ☐ Data extraction / Report generation/ Printing
- ☐ Data / Information update
- ☐ Forms / Charts design
- ☐ IT asset management
- ☐ Network management
- ☐ Photoshoot / Virtual tour

- ☐ Print publishing
- ☐ Program access request
- ☐ Request for replacement unit
- ☐ Security management
- ☐ Server management
- ☐ Service/Backup unit provisions
- ☐ Stand by support Engineer

- ☐ System development / Revision
- ☐ Transfer and installation of application software
- ☐ Web graphics publishing
- ☐ Web site creation
- ☐ Web site updating
- ☐ Others _____

Section A2 : Details of request *(attach additional sheet if necessary)*

_____

_____

_____ Date needed: _____ End date: _____

Section A3 : Requestor Information

_____
Requestor's signature over printed name

Position _____

Dept/College _____

Contact no. / Email _____

Noted by: _____
Print name and sign above

This part to be filled out by ITS Staff

DTS no. _____   Date Received _____

Section B1 : Action taken / Remarks / Problems encountered

Section B2: Charges if applicable

_____

_____

payable to ITS Development Fund

_____
Assigned staff's signature over printed name

Group & Section _____

Date / Time _____

_____
Coordinator's signature over printed name

This part to be filled out by the requestor upon completion of service requested

Section C1: Conforme

_____
Customer

_____
Date

Section C2 : Evaluation

Please rate the service rendered by ITS using the following criteria:

1 - Poor   2 - Moderately Satisfactory   3 - Satisfactory
4 - Highly Satisfactory   5 - Outstanding   0 - Not Applicable

_____ Response time   _____ Accuracy

_____ Efficiency   _____ Courtesy

Section C3 : Comments

Please write your detailed feedback below. Attach a separate sheet if necessary. Thank you for your cooperation.

_____

_____

_____