

Centre of Information and Technology Management
Requisition Performa to Resolve Internet Connectivity Problems

Sr. No.: <i>(To be filled by office of CITM)</i>	Dated:
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To: HEAD, CITM

Request initiated by (Name):	Signature:
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S.No.	Problem	Response
1.	Internet is not working	Yes/No:
2.	LAN port is not working	Yes/No:
3.	Internet works sometimes	Yes/No:
4.	Any other problem (Please give enough details)	

Location of affected user:	
Phone at location / other contact:	
Department/School/Centre/Section/Unit:	

(HEAD of Deptt./School/Centre/Section/Unit)

To be filled by CITM

Job assigned to with date:

(System Analyst / HCITM)

Problem Identified:

Signature
(Technician/Attendant)

Problem resolved on:

Signature of User:

(HCITM)