**IT WORK ORDER TEMPLATE**

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| --- |
| IT WORK ORDER |
| **REQUESTER NAME** |   | **PHONE** |   |
| **EMAIL** |   | **DEPARTMENT** |   |
|  |  |  |  |  |
| **PRIORITY LEVEL** |   | **ORDER DATE AND TIME** |  |
| **DATE PROMISED** |  | **DATE DELIVERED** |  |
|  |  |  |  |  |
| **REQUEST OVERVIEW** |
|   |
|  |  |  |  |  |
| **ACTION REQUIRED** |
|  |  |  |  |  |
| PLACE AN "X" IN THE APPROPRIATE BOX | PROVIDE ADDITIONAL INFO IF NECESSARY |
| REQUEST FOR NEW IT SYSTEM |  |   |
|  |  |  |  |
| REQUEST TO MODIFY OR ENHANCE EXISTING IT SYSTEM |  |   |
|  |  |  |  |
| ACCESS ISSUE |  |   |
|  |  |  |  |
| TROUBLE TICKET |  |   |
|  |  |  |  |
| OTHER (PLEASE DESCRIBE) |  |   |
|  |  |  |  |  |
| **PURPOSE** |
|  |  |  |  |  |
| PLACE AN "X" IN THE APPROPRIATE BOX | PROVIDE ADDITIONAL INFO IF NECESSARY |
| PREVENT LOSS OF INCOME / INCREASED EXPENSES |  |   |
|  |  |  |  |
| SAFETY REGULATORY GUIDELINES |  |   |
|  |  |  |  |
| ENHANCE / MAINTAIN CURRENT SERVICE |  |   |
|  |  |  |  |
| REPAIR |  |   |
|  |  |  |  |
| OTHER (PLEASE DESCRIBE) |  |   |
|  |  |  |  |  |
| **BUSINESS NEED OR PROBLEM** |
|   |
|  |  |  |  |  |
| **WORK REQUESTED** |
|   |
|  |  |  |  |  |
| **WORK AUTHORIZED BY** |   | **WORK COMPLETED BY** |   |

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