Change Management Request Form

Name (person requesting change / outage):   Title:

Person/Department performing change: Data/Application owner:

Emergency phone during change/outage:

Change class: Change urgency:

Proposed time for change (date & time):   Outage required? Yes   No

General description of the change:

Reason / Justification:

Users / Departments affected:

Systems / Applications affected:

Desired outcome:

Estimated duration:

Location of work to be performed:

Back-out plan (including estimated duration of outage if back-out is required:

Risks assessment: Risk details:

Communication plan (who needs to know and who will tell them):

IT resources required:

 Signature: Date:

Please attach any supporting documents, and a test plan for the change if applicable

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APPROVALS (for Change Control Board use only):

Review date: Approved   Denied

Reviewed by: Close date

Notes:

CIO signature required if emergency or extended outage: