

Waiting List Form Template Word

Organization Name: _____

Department/Service: _____

Date: _____

INDIVIDUAL DETAILS

Full Name: _____

Contact Number: _____

Email Address: _____

WAITLIST REQUEST DETAILS

Service or Item Requested: _____

Priority Level: High Medium Low

Expected Availability Date: _____

WAITING LIST TABLE

Name	Request Type	Contact Info	Priority	Status

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WAITLIST POLICIES

- **Requests will be fulfilled based on priority and availability.**
- **You will be notified once your request can be processed.**
- **Please update your contact details to ensure timely communication.**

Signature: _____ **Date:** _____