



**ilicomm**  
Technology Solutions

*Hi there,  
fill out my form  
and tell me all  
you know!*



# CHANGE REQUEST

## Before you start...

This form is set out to capture all of the change requests parameters, so please provide as many details as possible. This will allow the change team to manage the request effectively and ensure we are meeting expectations.

## How long will it take?

There is a 72 hour turn around period for updates / modifications, subject to resource availability. For urgent change requests, please state in the form below and contact ilicomm on 0121 289 3661 so that we can prioritise this request.

## Describe your Change Request

\* Full Name:

\* Organisation Name:

\* Your Email Address:

\* Your Contact Number:

\* Change Request Brief Description

Name of Software:

Update Software Version Number:

Location or File Path of the Software:

Does the Update Require a License?

 YES  NO

## Change Request Time

Is this Change Request:

Critical

Urgent

Normal

Date to Action Change

Start Time to Action Change

What is the Risk Window

## Change Management

Testing Process

Roll-Back Process

Work Plan

## Approval & Authorisation

Does this Change Request Require Internal Authorisation?

YES

NO

If Yes, Provide Authorising Full Name:

Authorising Email Address:

Authorising Contact Number:

## Out of Hours Contact

We may need to contact this person for out of hours change requests. Only provide details, 'if' they are different from those provided above.

Out of Hours **Contact Full Name**

Out of Hours **Contact Number**

**Office-use only.**  
**ilicomm Authorisation**

**Please Note:** If you are having trouble sending the form, please 'Save' the pdf and send to: [support@ilicomm.com](mailto:support@ilicomm.com) with a subject header 'Change Request'.