



# The OPEN University of Sri Lanka

## Information Technology Workshop

### Repair / Service Request Form

**Office Use Only**

Division / Department \*

Ext #

Job # :

Item\*

Other

Serial\* #

Brand

Model

Fault / Symptom\*

Other Accessory 1.

2.

(Sent with unit)

3.

4.

### Contact Details

Contact Person

Designation

e-Mail

Date:

Signature of the Head of the Department /Authorized Person (with Rubber Stamp)

Section below not to be filled by the applicant at the time of forwarding item

Job Received Person :

Job Priority  Low  Mid  High

Job Assign Person :

Signature

Actual Fault(s)

Remarks

Date

Signature

Received item from workshop in working condition

Received by

Designation

Date:

Signature