



Change Request

Instructions: Fill out the first page of this form as completely as possible and include all information known at the time the request is submitted. Make sure all information is correct. Submit the form to the SLMS Help Desk at SLMSHelpDesk@its.ny.gov

Name	Agency
Telephone	E-mail
Date	Date Requested By

Change Request

Description of change
Reason for Change
Users Impacted
<input type="checkbox"/> Check here for All Users

SLMS Technical Team Review

Evaluation
Estimate of cost & resources
Summary of proposed solution

Approval needed: Project Director Governance

Authorized by _____ Date _____

Governance Review Results
Date
Approved
Approved with restrictions
Not approved

FDD CEMLI
TDD CEMLI