

Oakland County Department of Information Technology
Enhancement Request

Change Request ID: 101635	Leadership Group: Finance/Admin
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Project Information

Project Name: HRMS EB	Requested By: Mary Gaissert
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Description of Change: Cleanse training resource records.

Business Justification: To reduce the number of unused records.

Deliverables Impacted:

Change Request Cause / Change Request Impact Assessment

Comments

Estimated Hours to Complete Change: 8.00	Change Request Date: 1/19/2010
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Authorization

I authorize/deny this Enhancement Request based on the above impact assessment and effect to the Enhancement Budget (see attached).

Project Sponsor:	Date:	_____ Approved	_____ Denied
Project Manager:	Date:	_____ Approved	_____ Denied

Change Request Completion Authorization

Sponsor Acceptance of Product:

Title:	Date:
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Project Manager:

Change Request Completion Date: