Computer Work Request Form

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Printed Name of Requestor: _____

Submission Date: _____ Date Needed: _____

Most requests will be processed within 48hrs of Genesys' receipt of signed work order. EMERGENCIES within 12HRS

Is this an Emergency? (see rates) YES or NO

Dept and Building Location: _____

Phone # and Ext: _____ _____ Fax #: _____

Make of Computer: _____

Drop-off or Requesting On-site Service (*see rates*)? ☐ ONSITE ☐ DROPOFF

STANDARD SERVICES (*please check at least one*)

- ☐ Network Setup: - Configure workstation with proxy, PDC and TCP/IP address
- ☐ Software Install: Specific to workplace, etc
- ☐ Hardware Install: - Power Supply, CD-Burner, DVD, Main Board, memory, etc
- ☐ Hardware Diagnostic: - With printed report and system summary
- ☐ Software Troubleshooting: Examine random or unexplained software errors
- ☐ Computer Cleaning: Case cleaning, anti-static cleaning of internal components, Re-seat IC's, tighten and bundle data cables, floppy and CD-ROM cleaning, check fans
- ☐ Biannual Tune-up: Speed up computer by optimizing BIOS settings, deleting junk files defragment/calibrate hard drive, update audio/video/modem drivers, optimize swap file, check/repair operating system files, check/clean registry, perform all Microsoft updates
- ☐ Computer Setup: Please indicate: ☐ workstation ☐ training station ☐ temporary
- ☐ Training Request: Please specify subject and # of people to receive training below

GENESYS USE ONLY

Client PO: _____

Invoice#: _____

Completion Date: _____

Tech Comments: _____

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Contact Log:

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Detailed Description of Problem or Additional Work requested:

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*Labor Rates: In-House - $50 per hour * On-Site - $80 per hour, including travel time * EMERGENCY: $100/hr*

The Requestor must complete this form entirely and make no willful misrepresentations with any information provided. Additional work not described here must be requested on a separate order. Incomplete forms will NOT be addressed. Please call 454-8454 if you have a question about this form. The requestor must be present to provide any passwords, if necessary, and for project completion verification.

Supervisor Signature: _____ Date: _____

Acceptance Signature from GCS Staff: _____ Date Scheduled: _____

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JOB COMPLETION VERIFICATION

Technician Who Completed This Job: _____ Date Completed_____

SIGNATURE of employee requesting work agreeing all work requested has been completed to their satisfaction and no further action is required.

Requestor Signature: _____ DATE: _____