

Email completed form to: support@udc.edu

Banner ERP Change Request Form

Date:			Change Control #:			
Change Name*:			onango oomao. "i			
Prepared by:						
Requested by:						
-	a shr	ort name used to identify the r	requested change			
The Ghange Name is	a sinc	of thathe asea to lachtiny the f	equested change.			
1. Requestor	Info	ormation				
Check all areas th						
Enrollment		Admissions	Registrar	Student Accounts		
Athletics Request Related		Financial Aid	Advising	Faculty		
To						
Reporting		Course Access	Student/SST	Other		
If "Other", please d						
Proposed Change	Des	cription and Consider	ations:			
Description:						
Justification:						
Impact of <u>not</u> implementing proposed change:						

Alternatives:					
2. Impact Evaluation					
This section captures the results of requests that require an impact analysis in order to approve/reject. Following the appropriate due diligence, a definitive decision and action should be achieved.					
Review Date: (MM/DD/YYYY)	E	valuator:			
Impact on Applications:					
Impact on Infrastructure:					
Impact on Cost:					
Impact on Quality:					
Impact on Resources: (Insert additional rows as needed)	Reso	ources Required	Work Days	Cost	
	Reso	ources Required	Work Days	Cost	
	Reso	ources Required	Work Days	Cost	
	Reso	ources Required	Work Days	Cost	
	Reso	ources Required	Work Days	Cost	
	Reso	ources Required Total		Cost	
	Reso			Cost	
additional rows as needed)	Reso			Cost	
Other Impacts: Risk associated with	Reso			Cost	

3. Signatures

I have reviewed the information contained in this Change Request Form:

Role	Name	Comments	Recommendation	Signature and Date
Requestor				
Office of the Registrar			Approve	
			Reject	
			Defer Until	
			Approve	
Admissions and Enrollment			Reject	
Enrollment			Defer Until	
			Approve	
Finance			Reject	
			Defer Until	
			Approve	
Student Accounts			Reject	
			Defer Until	
			Approve	
Student Affairs			Reject	
			Defer Until	
Academic Advising			Approve	
			Reject	
			Defer Until	
Law School			Approve	
			Reject	
			Defer Until	
Office of Information Technology			Approve	
			Reject	
			Defer Until	

Role	Nam	ne	Com	ments	Recomn	nendation	Signature and Date
					Approve		
					Reject		
					Defer Until		
					Approve		
					Reject		
					Defer Until		
Associate Provost for IE&A	Ansar Ahmed						
Final Recommendation: (check one)		Approve		Reject []	Defer Until	

The signatures above indicate an understanding of the purpose and content of this document by those signing it. By signing this document, they approve, reject or defer this change request as specified in the table above and will actively support that decision (including any associated funding, resourcing or schedule changes) to help ensure the success of this project.

A copy of the Final Recommendation will be sent to the Requestor, and a copy will be maintained by the Data Standards Committee. Additional copies will be sent to the Office of Information Technology and the Office of Institutional Research.

Please address any questions to Ansar Ahmed at aahmed@udc.edu or Maria Byrd at mbyrd@udc.edu or Maria Byrd at mbyrd@udc.edu