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|  | Change Request No.: |  |

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| **Normal RFC** | | | | |
| **Change Requester Details** | | | | |
| Date submitted: |  | Company: |  | |
| Date required: |  | Department: |  | |
| Requester name: |  | Manager's name |  | |
| Email: |  | Manager's email: |  | |
| Phone: |  | Manager's phone: |  | |
|  | |  | | |
| **Basic details** | | | | |
| Short Description: | | | | |
| Detailed description: | | | | |
| Justification: | | | | |
| Location: | | | | |
| Attachments: | | | | |
|  | |  | | |
| **Change Management Analysis** | | | | |
| Category: |  | Change Manager: |  | |
| Type: |  | Change Builder: |  | |
| Item: |  | Change Tester: |  | |
| Impact: |  | Assignment group: |  | |
| Urgency: |  | CAB members needed: |  | |
| Priority: |  | CI's involved: |  | |
| Initial Risk Rating: |  | Impacted Services: |  | |
| Short term benefits: |  | | | |
| Long term benefits: |  | | | |
| Pros and Cons: | | | | |
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| **CAB details** | | | | |
| TCAB Required?  DCAB Required? | | | | |
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| **Evaluation** | | | | |
| Who RAISED the change? | | | | |
| What is the REASON for the change? | | | | |
| What is the RETURN required from the change? | | | | |
| What are the RISKS involved in the change? | | | | |
| What RESOURCES are required to deliver the change? | | | | |
| Who is RESPONSIBLE for the build, test and implementation of the change? | | | | |
| What is the RELATIONSHIP between this change and other changes? | | | | |
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| **Risk analysis** | | | | |
| Type of risk: [social, financial, organizational, external] | | | | |
| Risk Impact: [trivial, minor, moderate, major, and catastrophic] | | | | |
| Likelihood: [1,2,3,4] | | | | |
| Probability: [1,2,3,4] | | | | |
| Risk Consequences: | | | | |
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| **Planning details** | | | | |
| Implementation plan | | | | |
| Remediation plan | | | | |
| Backout plan | | | | |
| Test plan | | | | |
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| **Financial details** | | | | |
| Relative cost: | | | | |
| Estimated effort in man days: | | | | |
| SLAs associated: | | | | |
| Approximate cost: | | | | |
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| **Associated tickets** | | | | |
| Associated Incidents | | | | |
| Associated Problems | | | | |
| Associated Change | | | | |
|  | |  | | |
| **Scheduling Details** | | | | |
| Planned start date: |  | Actual start date: | |  |
| Planned end date: |  | Actual end date: | |  |
| CAB required: |  | CAB Date: | |  |
| CAB Recommendations: | | | | |
|  | |  | | |
| **PIR** | | | | |
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| **Change Closure Information** | | | | |
| Closure code: |  | | | |
| Closure notes: |  | | | |
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