

Change Request Form



SAVE THIS FORM ON YOUR COMPUTER. FILL-IN ALL REQUIRED (*) AREAS.
E-MAIL FORM TO THE CONFIGURATION MANAGER AT:
USARMY.JBLE.UAASC.MBX.DLS-PDO-CONFIGURATION-MANAGEMENT@ARMY.MIL

*CHANGE TYPE:

*DATE:

NUMBER:

SCR ASSOCIATED WITH ECP:

*PERTAINS TO:

ATIS Learning
(ALMS)

EMC
RFMSS
MDTF

AOE
PdM
OTHER

*BRIEF TITLE TO IDENTIFY YOUR CHANGE:

*NAME:

*COMMERCIAL / DSN NUMBER:

*ORGANIZATION NAME & ADDRESS:

*E-MAIL:

MATERIALS REQUIRED:

MATERIALS COST:

ESTIMATED MANPOWER HOURS:

CONFIGURATION ITEM:

VERSION:

CONFIGURATION ITEM:

VERSION:

CONFIGURATION ITEM:

VERSION:

LIST CONFIGURATION ITEM(S) AFFECTED TO THE LOWEST CONFIGURATION COMPONENT C/CUNIT:

NOMENCLATURE / NAME / CC / CU

VENDOR I.D.

PART / MODEL NO.

NOMENCLATURE / NAME / CC / CU

VENDOR I.D.

PART / MODEL NO.

*PRIORITY:

SEVERITY:

*CLASSIFICATION:

*DESCRIPTION OF CHANGE:

*NEED / JUSTIFICATION FOR CHANGE:

*SYSTEM IMPACT:

*BENEFIT / SAVINGS OF IMPLEMENTING FOR THIS CHANGE:

*DOCUMENTATION:

*REVIEWS REQUIRED:

*RISK:

SUMMARY OF SIGNATURES:

APPROVE
WITHDRAWN
REWORK

APPROVE W/CHANGE
DISAPPROVED

KARON TAYLOR
INFORMATION SYSTEM
SECURITY MANAGER,
ARMY TRAINING
INFORMATION SYSTEM

APPROVE
DISAPPROVE

APPROVE W/CHANGE

COMMENTS:

COL KEVIN T. RILEY
DIRECTOR, TRADOC
PROONENT OFFICE, ARMY
TRAINING INFORMATION
SYSTEM

APPROVE
DISAPPROVE

APPROVE W/CHANGE

SIGNATURE:

CHRISTIE MURPHY
DEPUTY PRODUCT
MANAGER, ARMY TRAINING
INFORMATION SYSTEM

APPROVE
DISAPPROVE

APPROVE W/CHANGE

SIGNATURE:

VERIFICATION OFFICER'S
RECOMMENDATION

APPROVE
DISAPPROVE

REWORK

SIGNATURE:

COMMENTS:

CONFIGURATION MANAGER'S
SIGNATURE:

COMMENTS: