

KAIMOSI FRIENDS UNIVERSITY

P.O BOX 385-50309 KAIMOSI

DEPARTMENT OF ICT SERVICES

SERVICE REQUEST FORM

Date..... /..... /20.....

(Fill in Duplicate)

PART I

Department Requesting Services.....Office No.....

TO: In-Charge, ICT

Could you please arrange for the following services to be carried out at our department?

.....
.....

Name Signature

PART II

Comments by In-Charge, ICT

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.....
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Signature Date..... /...../20.....

PART III

Comments by IT Officer (Include materials required if any) Date..... /..... /20.....

.....
.....
.....

Name Signature.....

PART IV

Head of Department / Section that requested for service Date...../...../20... Time.....

I certify that the job has been carried out i) satisfactorily [**Tick as appropriate**]
 ii) Unsatisfactorily

Name..... Signature.....