

DEPARTMENT OF
COOPERATIVE COVERNANCE,
HUMAN SETTLEMENTS & TRADITIONAL AFFAIRS

Logged By:

Mothiba M.R

Card Number:

## ICT INFRASTRUCTURE

015-284-5591

REQUEST FOR CHANGE						
Requestor Details						
Ful	l Name	Mothiba M.R		Persal No:	82830886	
Busines	ss Unit:	Systems Develo	pment	nent		
Tele	phone:	015 294 2302		Building:	28 Market	
Cell N	umber:	0711785896		Floor:	2 <sup>nd</sup>	
	Town:	Polokwane		Office No:	2-62	
Details of the Change Request						
	Date	13/06/2018	website updates			
Describe the change that is being requested, including systems and components:		Please attached to be uploaded on the website newsroom, media statements				
Outline your motivation for this in terms of impacts, risks and benefits.						
Additional information:						
Signatures						
DECLARATION BY EMPLOYEE: By signing this form I confirm that the change is required for operational business purpose.						
Role	Position		Name	Signature	Date	
Requester	Requester Assistant Director		Mothiba M.R	1990	13/06/2018	
Approved by: Acting Deputy Director		Mothiba M.R		13/06/2018		
Implemented by:						
Verified by:						