University Centre for IT Services &Infrastructure Management
4th Floor, D - Block
Guru Gobind Singh Indraprastha University
Sector-16 C, Dwarka, Delhi – 110075

COMPLAINT FORM

1. Name of User   :   _____

2. Complete User Address   :   _____
    with Phone & Mobile.No   _____
                                       _____

3. Machine /Equipment Details :   _____
    (Model Sr.No. and Type/ Make)   _____

4. Complaint Type   :   **Computer / Printer / Scanner / UPS / Internet / Networking / Software/Antivirus / Website/ Others**

5. Problem   :   _____
    (Details of Complaint)   _____
                                       _____
                                       _____

Date :   (Signature of User)

Sign. of Head of Deptt./Incharge

Note:-
1*. Requirement of new computers and peripherals may please be requested to Registrar.*
2. For website updation , e-mail is to be sent at E-mail ID : ipupdation@yahoo.com   along with the approval of the competent authority.

For UCITIM Office Only: -

CALL REPORT

Date of Call Closed: _____

Problem Details		Equipment Details (S.No./Type)	
Date of Call Received		Date of Call Attended	
Engg. Name & company		Engg. Sig. With date	
User Name & Deptt		User Satisfied? (Yes/No)	Yes / No
User Sig. & Date		Call Status (Closed/Open)	Closed / Open

Asstt. Sig.:_____   Incharge Sig.:_____