



## PROOF OF CONCEPT (POC) REQUEST FORM

PART 1: INFORMATION ON PROOF OF CONCEPT	
POC Title:	
Person In charged:	
Location:	
Expected Duration	
Expected start date	
Expected end date	
1. Background and Overview: (Briefly write down the background information and overview of the POC)	
2. Objectives of the POC: (List the objectives that you want to achieve through the implementation of the POC)	
3. Scope: (List the scope and the boundary of the POC. Detail out what activities that will be implemented in the scope)	
4. Benefits: (List the benefits that you will acquire, upon conducting the POC)	
5. Impact (List the services/systems/facilities that will be affected when the POC is conducted)	
6. Resources and access to systems (if any): (List the resources needed for this POC, in terms of hardware, software, personnel and access to IJUM systems and databases)	
7. Cost / Budget involved (if any): (List the budget items involved, if any)	
8. Vendor / Third party involved (if any): (List the vendor / third party involved, if any)	
9. The POC will involve changes to the current production environment.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. The POC will probably negatively affect the business environment.	<input type="checkbox"/> Yes <input type="checkbox"/> No

**PART 2: RECOMMENDATION BY KCDIOM/ITD**

<p><b>Requested by:</b></p> <p>.....</p> <p>Name:        E-mail:        Contact No:        Date :</p>	<p><b>Recommended by:</b></p> <p>.....</p> <p>(Dean/Director)        Name:        Email:        Contact No:        Date :</p>	<p><b>Change Request:</b></p> <p><input type="checkbox"/> Required. Please submit the change request form.</p> <p><input type="checkbox"/> Not Required</p> <p><b>Change Manager:</b></p> <p>-----</p> <p>Name:        Date:</p>
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**PART 3: APPROVAL BY ITD MANAGEMENT**

<p><b>Received by:</b></p> <p>.....</p> <p><b>POC Coordinator</b>        Name:        Date:</p>	<p><b>Recommendation:</b></p> <p>To be deliberated in :        ITD Management Meeting No.....        Date.....</p>	<p><b>Status:</b></p> <p><input type="checkbox"/> <b>Approved</b></p> <p><input type="checkbox"/> <b>Approved with amendment</b></p> <p><input type="checkbox"/> <b>Not Approved</b></p>
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