Information Technology Division (ITD) _____

International Islamic University Malaysia

Insya Allah, **T**ogether we **D**eliver the best

TITLE: SERVER INSTALLATION/REMOVAL FORM

PART 1: (to be filled by the person who made the request)

☐ SERVER INSTALLATION   ☐ SERVER REMOVAL   DATE: _____

STAFF INFORMATION

NAME: _____   DESIGNATION: _____

KULLIYYAH / DIVISION / CENTRE: STAFF ID : _____   EXT: _____

_____   EMAIL : _____

EQUIPMENT DETAILS

SERVER NAME: _____   SERIAL NUM: _____

SERVER MODEL: _____   ITD TAG: _____

SERVER FUNCTION: _____

REASONS FOR REQUEST: _____

(To be filled by the Dean/Exec. Dir/Dir/HOU of Division/Department or Unit and attach additional documents if necessary)

I recommend / reject the above request. (Underline the appropriate decisions either to recommend or to reject)

APPROVED BY: (KUL/DIV/CENTRE OFFICAL STAMP)

_____
(Dean/Executive Director/Director/HOU)

Part 2: For ITRes use only (To be filled by Officer in charge)

DATE RECEIVED: _____   DATE COMPLETE: _____

STATUS : ☐ Approved   ☐ Not Approved   IP ADDRESS: _____ / _____

SERVER RACK NO: _____   SWITCH PORT NO: _____   FACEPLATE NO: _____

ACTION TAKEN BY: _____

SIGNATURE & STAMP:

Note & Guideline:
1. Request form must be submitted to ITD Servicedesk at least 2 working days before the event.
2. ITRes/ITD has the right to reject