



# MCKRU

Mir Chakar Khan Rind University Sibi

Forever Learning , Through Knowledge and Hardwork

## INFORMATION TECHNOLOGY SECTION

### NEW TELEPHONE EXTENSION REQUEST

*To be filled in by the requisitioner:*

Name:	_____		
Designation:	_____	Department:	_____
Request:	<input type="checkbox"/>	New Extension required	
	<input type="checkbox"/>	Shifting of existing extension required	
		From _____	to _____
	<input type="checkbox"/>	Complaint of faulty line	
	<input type="checkbox"/>	Outgoing trunk call facility	
Date:	_____	Signature:	_____
Verified by:	_____		
	<i>(Head of the department)</i>		

*Official use of Directorate IT:*

Request No:	_____	Date:	_____
Material issued:	Telephone set	_____	
	Cable	_____	
MDF	_____	System	_____
No. Allocated	_____	Trunk access	Yes / No
Result / Report:	_____		

Comments: \_\_\_\_\_ Signature: \_\_\_\_\_

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