

**IT Services Division
Indira Gandhi Delhi Technical University for Women
Kashmere Gate, Delhi -110006**

COMPLAINT FORM

**Note : 1. Please use separate form for Hardware related Problems and Networking related problems
2. Requirement of new computers and peripherals may please be made to Purchase Officer, IGDTUW**

Complaint Type 1: Hardware related	Computer & Peripherals	<input type="checkbox"/>	Printer	<input type="checkbox"/>	UPS	<input type="checkbox"/>	Antivirus	<input type="checkbox"/>
Complaint Type 2 : Networking Related	LAN/Internet	<input type="checkbox"/>	Projectors	<input type="checkbox"/>	(Please tick the appropriate Box)			

Name of Complainant: _____ Department _____

Contact No: _____ Email id : _____

Problem Description	*Machine/ Equipment ID	Room No/ Location

*Please use Unique Machine/Equipment ID given by the ITS Division to every Machine/Equipment

Date:	Signature of the Complainant :
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ITS Division

Date of Complaint Received: _____ Complaint Number: _____

Date of Assigning the Complaint to the Service Engineer: _____ Time: _____

Signature (IT Services)

CALL REPORT

**(TO BE SUBMITTED BY THE SERVICE ENGINEER TO THE ITS DIVISION)
(If any Machine/Equipment or part is taken for repairs, please fill the Annexure -1)**

Sl. No.	Work Performed for Resolving the Problem	Date of Attending the complaint	Problem Resolved (Yes/No)	If No, Reasons

Feedback of the Complainant

(Please Tick)		If Not Satisfied, Remarks:	Signature of the complainant with Date
Satisfied	<input type="checkbox"/>		
Not Satisfied	<input type="checkbox"/>		

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If any Machine/Equipment or part is taken for repairs, please fill the Details

Machine/ Equipment id	Room No/Location	Configuration of the Machine / Details of the part	Reasons for taking the Machine/Equip or its part	Date	
				Receiving	Return

At the time of receiving the machine/Equipment or part for Repairs by Service Engineer			
Name of the Service Engineer	Signature While Receiving the Machine/Equipment or part	Name of the Complainant	Signature of the Complainant

Signature of the HOD

At the time of receiving the machine/Equipment or part after Repairs by Complainant			
Date	Name of the Complainant	Signature of Complainant	Remarks

ITS Division

Date of Submitting the Closure Report to the ITS Division by Service Engineer	Name of the Service Engineer	Signature [Maintenance In charge (IT Services)]

Details of the Items Issued by the ITS Division for Repairs				
Name/Description of the Item issued	Quantity	Pg folio and Sl. No Stock Register	Date of Receiving by Service Engineer	Signature of the Service Engineer

It is certified that the above issued part has been used in repairing/resolving the complaint

Signature of the Service Engineer