

GURU NANAK DEV ENGINEERING COLLEGE, LUDHIANA

Central Computer Centre
Technical Support Service Form

Name of Department

Name of Concerned Staff member

Problem Description

System Details (If known)

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Complaint submitted on date..... Dispatch No.

(Signature of Concerned Staff Member)

(Signature of HOD/Section In-charge)

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(For Central Computer Centre Staff Only)

Complaint given to Complaint No.

(Signature of Officer I/c Computer Centre)

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Action taken

Fault repaired on date

Details of fault

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(Signature of Lab. Supdt.)

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(Comments of Officer-in-Charge, Central Computer Centre)

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(Signature of Officer I/c Computer Centre)

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Comments of concerned staff member (after repair)

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(Signature of Concerned Staff Member)