

## Document Change Request form

Format No.:

<b>Date:</b>	
From :	To:
<b>DOCUMENTS IN WHICH CHANGES SUGGESTED</b>	
<b>NATURE OF CHANGES</b>	
<b>NAME OF ORIGINATOR :</b>	
<b>DEPT. HEAD :</b>	
<b>( FOR APPROVING AUTHORITY ONLY )</b>	
<b>DECISION :</b>	<b>ACCEPTED / REJECTED</b>
<b>REMARK :</b>	
<b>DATE :</b>	

**APPROVED BY :**

**(MANAGEMENT REPRESENTATIVE)**

**AUTHORISED BY:**

**(MANAGING DIRECTOR)**