

****OD Enhancement Request Template****

****Requestor Information:****

- Name:
- Department:
- Email:
- Phone Number:

****Enhancement Details:****

- Enhancement Title:
- Description of Enhancement:
- Current Process/Tool:
- Desired Outcome/Benefits:
- Impact on Business Processes:

****Justification:****

- Reason for Request:
- Expected Benefits:
- Risks of Not Implementing:

****Priority Level:****

- ☐ Low
- ☐ Medium
- ☐ High
- ☐ Critical

****Additional Information:****

- Related Stakeholders:
- Estimated Implementation Timeline:
- Other Comments:

****Approval:****

- Requestor Signature:
- Date:
- Supervisor/Manager Approval:
- Date:

****For Internal Use Only:****

- Enhancement Request ID:
- Date Received:
- Assigned To:
- Status:

****Submission Information:****

- Submit to: [Insert email/portal]
- Submission Deadline:

****End of Template****