

Tennessee State University Request and Approval: Move to Production Request Form

Section 1. Inform	ation. To process you	r request, all information	must be complete. Plea	ase print or type.				
Requestor's		•						
Name:	[last]	[first]		[middle]				
Phone:	r	Department / Office						
Email:		ATP required by date *						
* Please note:								
Section 2. Request: memorandum of understanding. All lines must be completed.								
- te - fu - m - Di - Di	 I understand that the move to production process has the following requirements: testing functional sign off management sign off DBA team review / sign off Documentation on release, scripts, run instructions, and back out procedures are attached. (initial here) The requesting technical or functional lead has verified. 							
	following special request(s) related to this MTP (explicitly defined requirements not in the documentation, etc.): None							
Provide any additional details below:								
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Attached product documentation, including scripts, for detailed review:

Section 3. Required signatures: Obtained from affected area – e.g. HR / Payroll / Finance						
Requestor	Date					
Human Resources Functional Lead	Date					
Finance Functional Lead	Date					
Financial Aid Functional Lead	Date					
Student Functional Lead	Date					
Advancement Functional Lead	Date					
Information Systems Manager	Date					
Database Administrator (Implementation)	Date					
Database Administrator	Date					