

SOFTWARE (Complaint Form)

Name of User: _____ **Designation:** _____

Section: _____ **Sign of User:** _____

Following Problems have been observed during the operation of Software:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Dated: _____ Sign & Stamp of Section Head: _____

Please attached necessary screen shots of error for better understanding, if required

Technical Report:

Examined By (Name & Signature): _____

Comments

Remarks

a) Complaint is related to technical expert, has been rectified successfully.	
b) Complaint is related to Software Developer and has been forwarded to Software Developer	

Deputy Director (MIS-II)