**VoIP Telephone Connection Request Proforma**

**Date: \_\_\_ Apr 2019**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **User Information**  **(1)** | **Designation**  **(2)** | **Scale**  **(BPS or Eqv)**  **(3)** | **VoIP Number Already Installed in the Room Where Additional Connection is Required**  **(4)** | **Availability of PoE**  **(5)** | **Dept**  **(6)** | **School / Institute/Dte**  **(7)** | **Room & Floor No**  **(8)** |
|  |  |  |  |  |  |  |  |
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**Note:** Please attach copy of the office order (s) issued by HR Dte for whom telephone connection is required and please return unattended VoIP sets to ICT Dte to avoid of outgoing calls.

**(Recommended By (Principal/Dir/Assoc Dean) Approved by Mgr Communication (ICT)**

**YES NO**

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Remarks (If any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Stamp:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_