## OFFI CE MOVE PLANNI NG SHEET

Please complete this form and return to the Help Desk - helpdesk@lethbridgecollege.ca. We ask that the request is given at least 7 business days before the move is to occur to enable the coordination of the proper resources.

| Who | When | Move from | Port \# | Move to | Port \# | $\begin{array}{\|c} \mathbf{1}^{\text {st }} \text { or } \\ \mathbf{2}^{\text {nd }} \\ \text { move } \\ \hline \end{array}$ | What is being moved? | Comp. and/ or printer \# | Phone Tag or MAC | Phone ext. | wo\# | Main WO\# | Port Test | Port ready | Com plete install |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  | $\begin{aligned} & \text { 1st } \\ & \text { 2nd } \end{aligned}$ |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | $\begin{aligned} & \text { 1st } \\ & \text { 2nd } \end{aligned}$ |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | $\begin{array}{l\|} \hline \text { 1st } \\ \text { 2nd } \end{array}$ |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | $\begin{aligned} & 1 \mathrm{st} \\ & \text { 2nd } \end{aligned}$ |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | $\begin{aligned} & \text { 1st } \\ & 2 \mathrm{nd} \end{aligned}$ |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | 1st 2nd |  |  |  |  |  |  |  |  |  |

## Detail and/ or notes:

## Power needs (tech):

## Customer contact info:

