



## Product / Event Change Request

## Form D

Staff Details	
Staff Name	
E-mail	
Phone	
Staff ID	
Room / Building Location	
Product Details	
Is product/event LIVE on Store	Yes / No
Order Ref No.	
Product or Event Name	
Product or Event Details	
Changes Required –  all applicable. State Why or New Requirements	
Withdraw Product	
Product Changes	
Event Changes	

I confirm that I am the budget holder/have permission from the budget holder to submit this request. In submitting this change request, I confirm that we/I have read and understood the external store policy. Further I confirm that I have read and understood the Online Store Staff User guide and procedures.