

SSC Request Form

*Please complete sections 1 & 2 only;
sections 3 & 4 to be completed by SSC LT/PRI*

1. **Contact Information**

Name:

Date:

Job Title:

Company:

Phone:

Email Address:

2. **Request Description**

Describe the issue or opportunity you wish to address or solve?

What is your suggestion or solution?

Would you be willing to participate on a team to implement this request? Yes / No

For questions contact: nadcapssc@p-r-i.org

3. SSC LT / PRI Use Only

Who is affected? (Suppliers/Subscribers/PRI Staff/ Other)

How will the effectiveness be measured?

Are there key stakeholders that need to be involved to assure success of the project? What resources are needed?

Has any prior activity taken place to address this issue?

Is there a deadline associated with this activity?

Additional Comments:

Internal Use Only			
Date Received:	Date Reviewed by SSC LT:	Action: <input type="checkbox"/> Project Accepted <input type="checkbox"/> Project Declined <input type="checkbox"/> More Information Needed	Response Sent:
Reason for declining request (if applicable)::			