

### Client Request Form

School Information		
School Name:		
Contact Person Name:	Contact Tel. No.:	Email:
Reference No.:		

Request Information	
<input type="checkbox"/> Reset Admin Console Password. <input type="checkbox"/> Request Technical Fact Sheet. <input type="checkbox"/> Request Change System Configuration. * <input type="checkbox"/> Request Linux Password. * <input type="checkbox"/> Request MySQL Password.	# <input type="checkbox"/> Request System Recovery. # <input type="checkbox"/> Request License Transfer (eClass Migration). <input type="checkbox"/> Others, please specify:

\* Any operations in the Linux level or MySQL level may influence the system. Please pay extra attention to the process.

We are **NOT** responsible for **ANY** problem caused on the system by **ANY** change thereafter.

# One Recovery quota will be consumed, if school had already used up all Recovery quota under maintenance period, charges will be levied accordingly.

Remarks

Accepted by Customer

\_\_\_\_\_  
Signature & Customer Chop

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**\*Please return this form to eClass Customer Support by fax to 2136 1198 or email to support@broadlearning.com**