



National Textile University

Computer Center

JOB DESCRIPTION FORM

Name: _____ Designation: _____

Department: _____ Date: _____

Complaint / Problem: _____

Signature: _____ H.O.D (Concerned) _____

Computer Center Use Only

Inspection Date: _____ Inspection Time: _____

Findings: _____

Problem Fixed? Yes No

If No, Reason / Recommendation:

Person Dealing: _____

NOTE:

- 1) Please follow the procedure.
- 2) Wait for your turn because of other jobs in queue.
- 3) Time given to you to solve the problem is tentative.