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| **Quick Project****Tracking Number:** **Short Description:**  |
| **Requisition Information**  |
| Manager Name :\* |       |
| Phone :\* |       | Manager Email : |       |
| Number Of Temps :\* |       | Position Title :\* |       |
| Branch : |       |  |  |
| Executive : |       | Department Number :\* |       |
| Location(City,State) :\* |       | Customer :\* |       |
| OPS Director Name : |       | Maximum Temp Agency Bill Rate Per Hour : |       |
| Standard Hour Per Week :\* |      (HH24:MM) |  |  |
| OverTime Required : |  | Number Of OverTime Hour : |      (HH24:MM) |
| Project :\* |       |  |  |
| Start Date (DD-MM-YYYY) :\* |       | End Date (DD-MM-YYYY) :\* |       |
| Extension : |       |  |  |

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| **Skill/Requirement**  |
| SBU :\* |  | Support Type :\* |  |
| **Specific Details If Available :** : |
| Hardware Skill : |       | Software Skill : |       |
| Network Skill : |       | Other Skill : |       |

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| **Revenue Cost Information**  |
| **% Of Month**  | **Current Month** | **Next Month**  | **Successive Month** |
| % Of Month : |       |       |       |
| Revenue for this project : |       |       |       |
| Labor Cost For this project : |       |       |       |
| Other Cost for this project : |       |       |       |
| Total Cost for this project : |       |       |       |
| Profit Cost for this project : |       |       |       |
| Gross Margin(30% or More) : |       |       |       |
| Meets 30% Requirement[Y/N] : |       |       |       |
| Requires Exception Process[Y/N] : |       |       |       |
|   |
|  | **Current Month** | **Next Month**  | **Successive Month** |
| Revenue : |       |       |       |
| Labor Cost : |       |       |       |
| Other Cost : |       |       |       |
| Ops. Contribution w/out DIMS : |       |       |       |

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| **Applicant Comments** :  |       |

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