Systems Support Services
User's Computer Performance Checklist

Building Name			Performance Checklist																			
									Organizational Programs													
No.	Name	Date	Chrome Settings	Login	SeCity	My Desk	My Tasks	Reports	Zamaanik	Timesheet	Resume	SWE Project Management System	IMS DMS	Barg	Mail Room II	Library	Secity Help Desk	Project Programs	Dashboard	Characteristics of System Hardware	Status**	Remark

Action taken by:

Name: _____ Signature: _____ Date: _____

Systems Support Services Department Member   Month DD, YYYY*

* Mandatory
- The date format must be exactly the same as the one referred in the form.
** Please specify the Chrome version which has been tested.
** Excellent= E; Good= G; Poor= P; Very Bad= V