# ACTION PLAN CLOSING FORM

Version: 01

Revision: 00 Effective Date: 11/2018

|  |
| --- |
| **PART A: REQUEST FOR CLOSURE INFORMATION** *\*to be completed by the DITO/DEng only*  |
| **Action Plan:** | **Requested by:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name:Post:Date: |
| **OnTrack ID:**  |
|  |
|  | **Justification for Closing (Please tick √):** |  |
|  |  | Completed all planned activities.    |  |
|  |  | Transfer of responsibility. |  |
|  |  | Reduce in the scope of activities due to*\*please attach evidence(s)* | : |  |
|  |  | Activities are not applicable anymore due to*\*please attach evidence(s)* | : |  |
|  |  | Others *(please specify)* | : |  |
|  |  |  |  |  |
| **PART B: APPROVAL *(\*To be completed by ITG)*** |
|  |
|  | 1. All activities recorded in OnTrack has been updated accordingly?
 |  | Yes |  | No |  |  |
|  | 1. All planned activities recorded in OnTrack have been completed?
 |  | Yes |  | No |  |  |
|  | 1. Reason(s) for closing is accepted?
 |  | Yes |  | No |  |  |
|  | 1. Request for closure is recommended?
 |  | Yes |  | No |  |  |
|  |
|  | 1. Remarks (if any) :
 |  |  |
|  |  |  |
|  |  |  |
|  |
|  |
|  |  |  |  |  |
|  | Title of Meeting | : |  |  |
|  | Date of Meeting | : |  |  |
|  | Date of Closure | : |  |  |
|  |  |  |  |  |
|  | The request is |  |  | Approved |  | Disapproved |  |
|  |  |  |  |  |  |  |  |
|  | Update status in OnTrack  | : |  | Yes |  | No |  |
|  |
|  | Update relevant KPI record in OnTrack | : |  | Yes |  | No |  |
|  |
|  | Changes made (if applicable) | : |  |  |
|  |  |  |  |  |
|  |
|  | Notify Requestor | : |  | Yes |  | No |  |
|  |
|  | Reference(s) | : |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Processed by:** ITG Representative: | **Date**: |