



### HELPDESK INCIDENT REPORTING FORM

BAGONG PILIPINAS

Declaration and Data Privacy Consent: The information I have given is true, correct, and complete. By submitting this form, I authorize the Philippine Ports Authority to collect, use, process and retain my personal data in accordance with the PPA's Privacy Statement and for purposes specified in this form.

USR NO. \_\_\_\_\_

DATE/TIME REPORTED:	SYSTEM:	MODULE:
OFFICE/SITE:	CONTACT NO:	EMAIL ADDRESS:
DESCRIPTION OF THE INCIDENT:		
DATE OF OCCURRENCE:		If incident previously occurred Reference USR NO:
<b>USE THIS SPACE FOR TECHNICAL PROBLEMS ONLY</b>		
When did it occur? Pls check	<input type="checkbox"/> Confirming	When did it occur?
<input type="checkbox"/> Logging-in	<input type="checkbox"/> Exiting from one page to another	Date:
<input type="checkbox"/> Choosing an option from the menu	<input type="checkbox"/> Exiting from one system/subsystem to another	Time:
<input type="checkbox"/> Searching	<input type="checkbox"/> Others:, pls. specify	Where did it occur?
<input type="checkbox"/> Adding/inserting		Page/Screen:
<input type="checkbox"/> Updating		Object/Item/Field:
		Transaction/Document No.:
How did it Occur? Detail the last few steps before the problem occurred. Indicate keys pressed, data entered and error messages, if any.		
<b>USE THIS SPACE FOR NON-TECHNICAL PROBLEMS ONLY (INCLUDES PROCESS / PROCEDURES)</b>		
Problem Background: Briefly describe the background events. (Use separate sheet if necessary)		
Ideal Situation: What do you expect/recommend should happen? (Use separate sheet if necessary)		
Question: What question(s) needs to be answered? (Use separate sheet if necessary)		
<b>IMPACT OF THE PROBLEM</b>		
How does the problem affect you and the PPA? Pls. check.		
<input type="checkbox"/> I am totally prevented from doing my task and it will immediately impact the business process of the PPA.		
<input type="checkbox"/> I am limited from doing my task and it will eventually impact the business process of the PPA if long left unresolved.		
<input type="checkbox"/> I observed an area that can be improved but it will not impact the business process of the PPA.		
Please explain further		
<b>ATTACHMENTS</b>		
REPORTED BY:	REPORTED BY:	RECEIVED BY:
(SIGNATURE OVER PRINTED NAME) DATE	(SIGNATURE OVER PRINTED NAME IMMEDIATE SUPERVISOR) DATE	(SIGNATURE OVER PRINTED NAME) DATE



Help us serve you better. Please take a moment to give us your feedback by scanning the QR code and submitting the accomplished form. Thank you.

## **GENERAL INSTRUCTIONS:**

1. Indicate the Date/Time of reported
2. Indicate the System/application
3. Indicate the Module (if applicable)
4. Indicate the Office/Site
5. Provide the contact number and email address
6. Provide a description of the incident.
7. Indicate the date of occurrence
8. If said incident was previously occurred, provide the USR No.
9. Identify when and where it occurred by selecting from the options provided.
10. State how the incident occurred.
11. Provide a background of the problem encountered.
12. State what is the ideal situation.
13. Indicate questions to be answered (if applicable)
14. Identify how does the problem affect the user, select from the options provided.
15. Provide an explanation on how the problem affects the user if necessary
16. List down attachments
17. Fill in the name of person reporting the incident and affix signature
18. Fill in the name of person approving the report of the incident and affix signature and date