|  |
| --- |
| **Data Correction Request Form** |
| Project Name |  | Date |  |
| Requested MFI |  | Requester |  |
| Presented to |  | Ticket No. |  |
| Change Title |  |
| 1. The description of the change:
 |
|  |
| 1. The reason for the change:
 |
|  |
| 1. Is the information wrong in the source system (i.e your core banking system)
 |  YES [ ]  |  NO [ ]  |
| 1. If No.3 is YES, have you fixed it in the source?
 |  YES [ ]  |  NO [ ]  |
| Notes: Incorrect data impacts the credit report, overlap calculation and also requires enormous effort in data correction processes. |
| 1. Please list the actions taken to prevent this from happening again:
 |
|  |
| 1. Notes (TW)
 |
|  |
| 1. Approval:
 |
| Name | Title/Position | Signature | Date |
|  |  |  |  |