

REQUEST FOR TRIAL PERIOD TECHNICAL SUPPORT

Submission of this form entitles the owner of an active Software Evaluation Agreement to technical support from SoftQuest at no charge.

Submit to SoftQuest by E-mail or Fax (+01 203.866.2127)

Organization Name: _____

Clients: _____

Servers: _____

Testing Contact

Name: _____

Title: _____

Telephone/ext: _____

E-mail: _____

Decision Maker

Name: _____

Title: _____

Telephone/ext: _____

E-mail: _____

Did decision maker provide input into the issues list? _____

Has budget been allocated for this project? _____

What do you want the software to do for you?

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____