**QA EVALUATION SIGN-OFF**

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| **A. Product Information** |
| Customer Request ID #: LIVE: Unable to Reset Password (Req. ID# 239) | Redmine ID #: 1942 |
| Project Name: AGRO INTERNET BANKING |
| Module Name: RIB>Access control – forgot my password | Module Version #: SUPPORT |
| **B. Project Team** |
| Project Manager: | **Tan Lee Lee** |
| Developer: | **Alwi Husada** |
| **C. QA Team** |
| Tester Name: Norhaidah Dasuki | Submit Date: 8/2/2013 |
| Proof of Compliance: | [x]  Testing Checklist completed [x]  Test Results attached. |
| **D. Sign-Off Section** (Test Team Leader) |
| This system conforms to QA requirements. |
| Comment:Test done as per requirement. | Name/Position: Norhaidah Dasuki / QA ManagerDate: 8/2/2013 |