

## **AMS CHANGE REQUEST COVER SHEET**

**Change Request Number:** 12-03

**Date Received:** 10/21/11

**Title:** Update to IOARD Template

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**Initiator Name:** Elizabeth Turcich

**Organization Name and Routing Symbol:** Independent Safety Assessment (AJS-23)

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*ASAG Member: Elizabeth Turcich*

*Telephone Number: 609-485-7035*

**Policy OR Guidance:** Guidance

**Affected Section/Text Location:** Test and Evaluation Guidelines, Appendix C-12

**Summary of Change:** Update template with required safety language

**Reason for Change:** The template needs to conform with the required information for determining system readiness for entering Independent Operational Assessment (IOA)

**Development, Review, and Concurrence:** AJS-23

**Target Audience:** Service teams with programs designated for IOA

**Potential Links in FAST for the Change:** None.

**Attachments:** redline and final.

**Briefing Planned:** Yes.

**ASAG Responsibilities:** Review and comment.