

ECS Configuration Change Request

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|---|----------------------------|--|-------------------------|
| CCR No. 96-0883 A | Logged Date 7/31/96 | Rev. A | Request Type CCR |
| Priority Routine <input checked="" type="checkbox"/> Urgent <input type="checkbox"/> Emergency <input type="checkbox"/> | Affected Release A | | Change Class II |
| Title (description) Update RTM to make SCF-related corrections for Release A | | | |
| Documents Affected None | | Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference AC-96-0410, AC-96-0412, CCR 505-41-12-002 | |
| RTM Change <input checked="" type="checkbox"/> Start New Baseline <input type="checkbox"/> | | | |
| Problem RTM needs updating for the SCFs: 1. SCF-0040#A is no longer in the SCF IRD and SCF-0300 is not needed until Release B 2. Mandatory SCF RBR attributes contain TBDs and missing values 3. Several SCF RBRs use language that reflects the earlier architecture and may be unclear | | | |
| Proposed Solution: 1. Remove SCF-0040#A and SCF-0300#A 2. Provide correct values for SCF RBR mandatory attributes that now contain TBDs and missing values 3. Provide interpretation and clarification text for SCF RBRs that contain old language N.B.: Revision A removes unnecessary underscores from table for SCF-0310#A and adds more | | | |
| Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input type="checkbox"/> QA <input type="checkbox"/> Rel. A <input checked="" type="checkbox"/> Rel. B <input checked="" type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input checked="" type="checkbox"/> SMO <input checked="" type="checkbox"/> Subconts <input type="checkbox"/> A.1 <input checked="" type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> <small>(Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000)</small> Schedule: None <input checked="" type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____ | | | |
| Originator <u>Stanley A. West</u> | | (Signed) Stan West 09/10/96 | |
| | | <small>Signature</small> | |
| Office <u>SMO</u> Office Manager | | (Signed) Robin Whitehurst 09/11/96 | |
| | | <small>Robin Whitehurst</small> | |
| | | <small>Date</small> | |
| Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments: | | | |
| CCB Chairperson | | (Signed) R E Clinard 09/11/96 | |
| | | <small>Signature</small> | |
| | | <small>Date</small> | |

