

User Acceptance Report

Application / Module	
Client	
UAT Date	
Agreed UAT Criteria	

Activities Detail

	Activity Name	Activity Detail
1.	Software Deployment Date	
2.	Training Date	
3.	Training Duration	
4.	Training provided to / Business Users	
5.	Target date to complete UAT	
6.	Actual UAT Completion date	
7.	Days utilized in UAT	
8.	Activities Completed	

Remarks: Satisfactory Un-satisfactory

Comments: _____

Module Owner(s)
<Customer / Client Company Name>

Project Manager
<Vendor Company Name>