

Request for Computer Access

This form should be completed and submitted **at least 3 business days before** an employee begins working, requires changes or transfers to a new department. If you need assistance completing this form, please refer to the documentation provided.

Date Requested:

Request Type: New Change/Transfer Termination

Date Required:

Requester's Information:

Requester's Name:
Phone Extension:

Employee Information

First Name:

Middle Initial:

Last Name:

Employee Job Title:

Phone Ext:

Department Name:

Computer # Assigned:
(Ex: AP17D01)

Access Information:

Network Account

Identify any shared folders this user should have access to:

IBM iSeries i5 (formerly known as AS400)

Make new user's access like _____ (existing user)

MS Outlook (Email and Calendar)

Identify any additional group memberships other than "AllUsers":

Other: please identify -

Remote Access (prior approval required)

Additional comments (if needed):