



Account Request Form

Use this form to request new accounts or access to departmental file shares. Return the completed form to the Helpdesk or your GeoTeam Consultant.

Faculty Staff Temp New Student Returning Student

Faculty/Staff/Student Information:

Name: _____ Job Title: _____

Department: _____ Building: _____ Room: _____ Phone: _____

Supervisor: _____ Supervisor's Phone: _____

SSU PeopleSoft ID #: _____ Chart Field #: _____

New Accounts Needed:



Individual Email
 Office Email* _____



Domain



Individual MeetingMaker
 Office MeetingMaker* _____



Voicemail

Specific Domain & File Share Access Information:

It is important that this information be accurate. Contact your GeoTeam Consultant or Helpdesk Representative for help, if you have any questions.

User Name
Example: smithj

Folder Path(s)
Example: \\ssu-5\IT\UWS\SharedData

Type of Access
 Read Only Modify
 Read Only Modify
 Read Only Modify

Please sign below acknowledging that you have read and understand the following. By signing you are agreeing to these terms and conditions:

- Student accounts will automatically expire at the end of every semester. A new request must be completed for each semester. Staff accounts remain active for the term of employment. Student domain accounts are not backed up and have no home directory.
- Whenever possible, IT will make a reasonable effort to restore damaged or missing files. However, IT will not be responsible for any damaged, deleted or missing files that may result from providing student access to departmental file shares.
- Administrators: Please notify your GeoTeam Consultant/Helpdesk Representative immediately if a student/staff leaves or is terminated from the position.
- If the IT department determines that a staff or student's account is being used for anything other than legitimate University business or is compromised in any way, IT reserves the right to terminate the account without prior notice to the department.

This access is for my use in performing my job duties and responsibilities. I agree that **my username and password will not be shared**, and that I am responsible for any accesses logged against my username. I understand that any misuse will result in the revocation of my access without notice.

Date: _____ Appropriate Administrator: _____

Date: _____ User Signature: _____

* First office account is free. Additional accounts require a chartfield string.