

PERSONNEL TECHNOLOGY ACCOUNTS/EQUIPMENT

(Human Resources has to approve this request, they will forward it to the technology dept. for processing)

____ Add

____ Change

____ Remove

Today's Date: _____

Name: _____

Phone number/e-mail will only be used to contact employee in regards to technology accounts/equipment approval.

Personal Phone #: _____

Personal E-Mail: _____

Building/Department: _____

Job Title: _____

Supervisor's Name: _____

Employee's Signature: _____

Supervisor's Signature: _____

Human Resources Signature: _____

Please issue the above employee access to the below checked accounts/equipment:

<input type="checkbox"/>	<i>Network</i>	<input type="checkbox"/>	<i>Laptop</i>
<input type="checkbox"/>	<i>Email</i>	<input type="checkbox"/>	<i>Cell Phone</i>
<input type="checkbox"/>	<i>MiStar</i>	<input type="checkbox"/>	<i>Zangle</i>
<input type="checkbox"/>	<i>ESS</i>	<input type="checkbox"/>	<i>Atlas</i>

Issued by/on: _____