FACULTY/STAFF

Integrated Information Technology Services

E-mail ID Request Form

Please complete Section I. Read the statement in Section II and sign your name. Print your name twice in Section III. PLEASE PRINT LEGIBLY. Your form will be returned if it is unreadable. Please return the completed form to The Computer Help Desk, Room 378 in the basement of the Library.

Rev. 7/03

Section I:

1 2 3 4 5 6

Name: _____ | | | | | | | | | | | |

First M. I. Last

Div/Dept:_____ Building:_____ Room #:_____ Extension:_____

I am: ☐ Staff Exempt ☐ Staff Non-Exempt (e.g. SCT) ☐ Faculty ☐ Adjunct ☐ Contract ☐ Other: _____

Section II: I understand that this account has been given to me as part of my employment at Utica College. The ID and password assigned to me are to be used solely by me, e.g. I will not share my user ID or password with anyone, including family and friends. The Internet and electronic mail should be considered like any other College resource and be used accordingly, that is for College business. Abuse of this account will be automatic grounds for disconnect and possible disciplinary action.

I am requesting this account for the faculty member

_____
Signature

_____
Division Head Signature

_____
Division Head Signature

OFFICE USE ONLY: **IITS Signature:**_____

Group #:_____ Date Received:_____

User ID:_____ Date Completed:_____

User #:_____ Password: _____

Please fill in your name only in the boxes below

Name: _____

User ID: _____

Password: _____

Your E-mail Address is:

_____@utica.edu

This is your UC e-mail account information. Please call the Computer Help Desk at x3115 for any questions.

Name: _____

Department: _____

Date Completed: _____