



## Computer Information Services Department

### Employee Technology Systems account request

Employees Cell #

Today's Date:

#### EMPLOYEE INQUIRY INFORMATION

Employees Full Name:	<input style="width: 95%;" type="text"/>	Employee #:	<input style="width: 95%;" type="text"/>
Job Title:	<input style="width: 95%;" type="text"/>	Assigned Dept.:	<input style="width: 95%;" type="text"/>
Prior LCC e-mail address:	<input style="width: 95%;" type="text"/>	Phone/Extension:	<input style="width: 95%;" type="text"/>
Office Location (Building & Rm #)	<input style="width: 95%;" type="text"/>	Supervisor/Director Signature:	<input style="width: 95%; height: 30px;" type="text"/>

#### INQUIRY DETAILS

***Type of Account Requested: (Check all that apply)***

Telephone Support:	
Needs Phone	<input type="checkbox"/>
Voice Mailbox Reset/Setup	<input type="checkbox"/>
Long Distance Code	<input type="checkbox"/>
PC Network Account	<input type="checkbox"/>
<input type="checkbox"/> <b><i>Student/Employee need account access</i></b>	
CARS Account (with completed training)	<input type="checkbox"/>

Start/Hire Date:

**Please indicate email group  
they need to be added to.**

This Employee is:  New Hire    Current Employee  
 Transferred Position  
 Re-Hire (Had previous accounts)

Staff Email  
 Faculty Email

***Approval to add new accounts listed above:***

Date:

Human Resources:

***I.T. Office use only***

Account	Date Enabled	Entered by	Notes: (module, account name)
Voice Mailbox			
Long Distance			
Network			
E-Mail			
CARS Account			