



**CONFIDENTIAL**

**Employee Information Technology  
Service Request**

Date \_\_\_\_\_

**PLEASE FILL OUT ALL SHADED GRAY AREAS – SIGN & RETURN TO HELP DESK F-22\***  
**\* For Part Time/Adjunct Employees – Sign & Return to Human Resources F-6**

**To be completed by HR Department or Deans of Each Division**

*(Please check one)*

- New Employee     Transferred Employee     Terminated     Retired/Resigned

Employee Name: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_ Position: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Dept. Code: \_\_\_\_\_

Building: \_\_\_\_\_ Room Number : \_\_\_\_\_

Employee Status:     Faculty     Staff     Full Time     Part Time/Adjunct

Transferred employee moving from (department, building & room number)  
\_\_\_\_\_ to \_\_\_\_\_ on \_\_\_\_\_ (date)

**Phone Service**

Phone Service Requested  yes     no    Voice Mail Requested  yes     no

Phone is in place – extension # \_\_\_\_\_     Will Need Phone

Transfer previous phone service from extension \_\_\_\_\_ to (building/room) \_\_\_\_\_

Will need Phone line installed

Terminate previous phone service from extension \_\_\_\_\_

Special Phone needs: (examples: forward to extension, take voice mail off, put voice mail back on)

\_\_\_\_\_

\_\_\_\_\_

**Computer Needs**

Need Network access     Area is network ready     Remove Network Access

Have Computer in area     Need Computer Setup

System requirements / special needs: \_\_\_\_\_

**Special Software Needs (Dean to approve special software and purchase if necessary)**

Standard Package – MS Office (Word, Access, Power Point, Excel), GroupWise, HP 3000  
 Need the following special software installed: \_\_\_\_\_  
\_\_\_\_\_

**Administrative Systems Access (HP 3000)**

Needs access to Administrative Systems       Remove Access (date) \_\_\_\_\_  
Access programs and rights to be the same as \_\_\_\_\_  
Will need access to following programs/functions: \_\_\_\_\_  
\_\_\_\_\_

**E-mail Access**

Needs E-mail       Remove Access       Put on Adjunct One Year E-mail List

**Request for Training**

Phone / VM       Administrative Systems       Network Login       E-Mail

**Additional Comments**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Authorized Signature X** \_\_\_\_\_ Date: \_\_\_\_\_  
(Dean or Department Head)  
**Authorized Signature X** \_\_\_\_\_ Date: \_\_\_\_\_  
(Human Resources – Part Time/Adjunct Only)

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**To Be Completed by IT Staff**

**Work Order Numbers** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

**Date Work Orders Completed** \_\_\_\_\_

**Terminated Employee Information**

Network secured on (date) \_\_\_\_\_ by \_\_\_\_\_

Administrative Systems secured on (date) \_\_\_\_\_ by \_\_\_\_\_

E-mail secured on (date) \_\_\_\_\_ by \_\_\_\_\_

Phone/VM secured on (date) \_\_\_\_\_ by \_\_\_\_\_