

UNIVERSITY OF SOUTHERN INDIANA

Network UserID Request Form

Computer Center
University of Southern Indiana
Orr Center Room 096
8600 University Boulevard
Evansville, Indiana
Phone: (812) 465-1080
Fax: (812) 465-1253

Purpose To be completed by USI employees in order to obtain a UserID for the USI network and/or USI web site. Complete and sign this form and submit to your fiscal agent for approval. Once approved, the form should be sent to the Director of Computer Services for processing.

Date: _____

Employee ID: _____ Example: 111-22-3333 or 000111222

Full Name: _____
Last Name First Name

Department: _____ Phone Number: _____
Department Name Room Number

Check all network accounts that apply to your request

- UCS (Novell Netware) Account
- Outlook (Faculty/Staff Email) Account – *UserID@usi.edu*
- Web Developer – Specify Web Folder: _____
- Other Server – Name of Other Server: _____

Check the appropriate employment status of the employee

- Student Worker
- Faculty or Staff

Fiscal Agent Signature: _____

I understand that when I am using the USI Local Area Network, the Internet, or other telecommunications device, I must adhere to all rules of courtesy, etiquette, and laws regarding access and copying of information as prescribed by federal, state, or local law; the host environment and the University of Southern Indiana.

Signature

Date