

## **Employee Technology Access Request**

Office of Technology Services Updated: September 2024

New Employee

Update existing access

Employee Name:						Banner ID (PIDM):		
Position Title:					'			
Department:								
Location:	ocation:				Preferred Name:			
Position Type:		Faculty Staff Stipend End Date:	Student	nt Vendor Vo		onteer Other Explanation:		
Date Requests needed:				Actual Start Date:				
	Pl	ease check appropri	ate resources	needed an	d add a co	mment if	necessary	
Resources	✓	Comments						
equipment needed: Choose your options in each ection:		Laptop Desktop	Apple Dell		External Accessories: Display Keyboard Mouse Other:			
Telephone Changes:		What extension to be assigned?  Does voicemail password need resetting?  Any other changes needed?						
Indicate which res	ourc	es are needed AND	who's access	to mirror				
Banner:								
Argos:								
Intellicheck:								
Remus File Server:		Indicate the shared drives needed:						
Sagan:								
Slack:		Zoom: Basic or Licensed?						
Please check if this	pers	on needs to send em	ails to the en	tire campus	s via depar	tmental gr	oups?	
Other (please specify)								
	<u> </u>	Author	ization and	Policy Ack	nowledgr	ment		
		nd the SBC policy on re ranted until IT has rece					e, volunteer, vendor, or other gy Agreement Form.	
Signature of Depar	rtme	nt Head/Supervisor:						
Signature of Direct	tor o	f Technology:						