Northwest Indian College
Network Access Request

Please use this document to inform the IS Department of new users or a change in user status. Supervisors should use this form to request network access for new employees or to adjust existing employees' user accounts. Each new employee and manager should fill out the form, and the manager should send the completed form to the IS Department along with a signed Internet/Intranet Acceptable Use Policy.

A—User Information (please print)
***Required fields (must be filled out completely before request is processed)
***1. First Name_____M.I.____Last Name_____
***2. Is this person replacing someone? ☐Yes ☐No If yes, whom?_____
***2. Work Phone Number_____   Building Number_____

To Be Filled Out By	Human Resources Before Processing By Information	
Systems Job Title:	_____	*H.R. initials* _____
Department:	_____	*H.R. initials* _____
Employee Type:	__ Permanent __ Temporary __ Contract	

DEANS	PRESIDENTS / VICE
DIRECTORS	PART TIME TEMPS
FACULTY	RESEARCH SPONSORED PROGRAMS
FINANCE	SITE PERSONNEL
INFORMATION SYSTEMS	STAFF
INTERNS	STUDENT CONTACTS
MANAGERS	STUDENT SERVICES

Employee Requires:

__ Personnel folder (P: drive storage limit TBD)
__ Internet Browsing/Surfing (**Supervisor Please Initial Here For Internet Access**: _____)
__ Other _____

B—Authorization
***Required fields (must be filled out completely before request is processed)
***User Signature_____Date _____/_____/_____
***Supervisor Name (please print)_____
***Supervisor Signature_____Date_____/_____/_____
Upon completion of signing this form, the Employee agrees **NOT** to disclose their user name and password to **ANYONE FOR ANY REASON**. Employee must read and sign the Internet /Intranet Acceptable Use Policy and read the Data Security Policy. The Internet /Intranet Acceptable Use Policy must be signed and returned with this form to the IS Department in order to gain access to the NWIC network.

For Internal I.S. Department Processing Only __	AD Account	*I.S. initial*	_____	*Date*	_____
__	E-mail Box	*I.S. initial*	_____	*Date*	_____
__	Internet/Intranet Acceptance Form	*I.S. initial*	_____	*Date*	_____
__	Group Membership(s)	*I.S. initial*	_____	*Date*	_____
__	Personnel folder/Security	*I.S. initial*	_____	*Date*	_____