

Sample Form CU-2
COMPUTER/NETWORK USER REQUEST

Date Requested _____ Add User
_____ Remove User
User Name (Print clearly) _____
Title _____ Department _____

Please fill out this section if you are REMOVING a user.

Date to remove user _____

Please specify where you would like any of this users documents ~~this user created~~ to be transferred:

Should email history be transferred to another user ? Yes - to _____ No

Should messages be forwarded to another user ? Yes - to _____ No

Should an auto-reply inform senders that this address is no longer in service ? Yes No

If Yes the standard reply will be "This account is no longer active", if you would like something different please specify:

Please fill out this section if you are ADDING a user.

1. Should this user have access to email? Yes No
2. Should this user have access to shared drive(s)? Yes No
3. If yes, please specify which drive(s): _____
4. Should this user have access to MUNIS? Yes No
5. If yes, please specify which module(s): _____
6. Should this user have access to the internet? Yes No
7. Are there any specific programs or icons this user needs? Yes No
8. If yes, please specify which program or icons: _____

SIGNATURE

Department Head Signature and Title _____ Date _____

Request Approved By: _____, IT System Manager

Please allow two business days after request is approved for processing.