



Computer Access and Authorization Form

EMPLOYEE INFORMATION (FILL OUT COMPLETELY USING DEPARTMENT INFO IF NECESSARY)	
*Employee Name: <small>(Please Type or Print Clearly)</small>	
*Job Title:	
*Department:	
*Extension:	
*Building and Room Number:	
*UVID	
*Have you <i>ever</i> worked on campus before in <i>any</i> position? Y N	
*Is this a name change? Y N What was the old Name?	
Office Manager Info	
*Full Name:	This is the person in a supervisory position that needs to be notified when the account is made. Personal email addresses are NOT acceptable! *If you do not fill this out no one will be notified when the account is made and / or the account may be created incorrectly We need the Username so we can make sure the new Employee gets put in the right department.
*Email:	
*Network Username:	
* UVID	
Signatures	
<i>I hereby acknowledge and understand that all computer passwords, software procedures, and related information are of a highly confidential nature. I shall not sell, give away or circulate any portion to anyone without the proper authorization (THIS MEANS YOU WILL NOT GIVE ANYONE YOUR PASSWORD). In addition, I shall not attempt to access unauthorized information, screens, files, data, etc. I also understand that releasing confidential, private, or personally identifiable information without the appropriate authorization is a violation of Federal and/or State law as well as College policy. I acknowledge that if I violate any of the above stipulations, I will be subject to disciplinary action, including the possibility of dismissal. I further understand that Utah Valley State College is absolved of all responsibility due to my negligence.</i>	
Employee Signature:	Date:
Chair Person Signature:	Date:

OFFICE USE ONLY		
Username:	Created by:	Date: