ServiceDesk
Information Technology Services

Department, Unit, Subunit, or Service Account Request Form

Requestor Information

1. Requestor's Name: _____
2. Requestor's Department: _____
3. Cal Poly Email Address: _____
4. Phone: _____

Unit being: ☐**Create** ☐ **Modify**

1. Name of Department ☐Unit, ☐Subunit or ☐Service: _____
2. Cal Poly Username / Email Address: _____
3. Department: _____
4. College: _____
5. Technical Contact Person: _____Change to:_____
6. Technical Contact Person Title: _____
7. Administrative Contact: _____ Change to:_____
8. Administrative Contact Title: _____
9. Building: _____ 10. Room: _____ Change to:_____
11. Phone: _____ Change to:_____
12. FAX: _____ Change to:_____
13. Check this box if you do **NOT** want this unit listed in the public directory ☐

14. **Purpose of account:** _____

Check the ITS Services that you are requesting for this unit

15. ☐ My Cal Poly Portal ☐ Email ☐ Central UNIX ☐ Other _____

Billing and Sponsor for Reimbursable Accounts – REQUIRED for Secondary Department Accounts

We do not currently bill for this service, but we may begin to do so in the future. For more information, visit: http://servicedesk.calpoly.edu/accounts_passwords/accounts/organizational.html.

16. Fund: _____ 17. DeptID: _____ 18. Acct: _____
19. Program: _____ 20. Grant/Project:_____
21. Class: _____ 22. Org Key: _____

23. Authorized Signature: _____
24. Print Name: _____ 25. Title: _____

Certification of Use

I certify that the requested resource/service will be used for purposes consistent with the missions of the California State University and Cal Poly, and in accordance with all applicable University policies and State and Federal laws. I acknowledge that unauthorized use of information technology resources may incur civil and/or criminal penalties and result in disciplinary action and loss of access. I accept responsibility for reading, remaining updated, and abiding by Cal Poly's Responsible Use Policy located at http://security.calpoly.edu/policies

26. Account User Signature:_____ 27. Date: ____/ ____/ _____

This form may be mailed via campus mail to the ITS Service Desk, building 14 room 114 or faxed to (805) 756-1536.
Questions? Contact the ITS Service Desk at servicedesk@calpoly.edu or (805) 756-7000

Cal Poly, SLO Information Technology Services Office Use Only

SRS Case ID:_____ Processed BY: _____ Date Processed: ___/ ___/ ___
User Login: _____ Mailed: ___/ ___/ ___ Called to Pickup: ___/ ___/ ___
Creator's Initials: _____ File Pathname: V:\ITS\uss\ServiceDesk\Public\Forms Last Update: 06/23/09