

Network Access Application Form

Applicant Details - (Please PRINT clearly in BLOCK letters.)

Surname

First Name

Rank

Division

Office Telephone Number

Organization

Office Number

Requested By (Username)

Email / Network Access Requested

Email and PC/Mac Network Logon Access

Internet Access Only

Applicant Declaration

I understand and agree that access is granted on the condition I honour the IT Policies with regard to the use of and copyright of computer software.

Applicant's Signature

Date Signed

Network Authorisation (External Parties Only)

I hereby give consent that the applicant be granted temporary access to the network.

Authorising Signature (Head of HR)

Name of Signatory (Please PRINT!)

Phone Number

Date Signed

Email / Desktop Network Authorisation (Employees Only)

I certify the applicant is a staff member of the Regional Council.

Authorising Signature (Head of HR)

Name of Signatory (Please PRINT!)

Phone Number

Date Signed

Please submit your completed application to the IT Office

IT Office Use Only

Service Request #: _____

Username Issued: _____

Processed By: _____

