Suffolk County Community College
Request for Network Account Activation

Use this form for newly hired faculty and administrators:

SCCC's computer network is an important college resource. It provides access to e-mail, the Intranet and Internet, and server-based applications. It is a major vehicle for communications, development and training, instruction and business process support. Individuals are expected to use this resource.

When hired, faculty and administrators are provided a network account with e-mail, web directory space, and LAN and dial-in access. Individuals are required to complete this form to activate their account.

- Full-time employees should return this form to Human Resources.
- Adjuncts should return this form to the Division of Academic & Adjunct Services, Smithtown Science Building, Room 100.

Your account will be activated when all the necessary paperwork for Human Resources has been completed and you have been added to the college's data systems. Once your account is activated, you will be notified of your ID and initial password, and receive access instructions.

Please note:

1. **Network users have responsibilities for network security and efficient operation (see Information Technology Policies and Guidelines attached). Your signature on this request will serve as your agreement to abide by the network policies recommended by the College Computing Council and adopted by the college.**

2. **If you obtain an e-mail account, your e-mail address will appear in the college's e-mail directory, which is accessible through the home page.**

3. **Network accounts will remain active while an individual is employed at the college.**

Please type or print clearly. Please use your full name, not a nickname. This name will appear in the college e-mail directory.

First Name: _____ Middle Initial: _____

Last Name: _____ Employment Status: ( ) Full time ( ) Part time

Title: _____ Classification: ( ) Administrator ( ) Faculty

College ID / Banner ID _____

Office: Campus: ( ) Ammerman ( ) Central ( ) West ( ) East ( ) Open/TechniCenter

Building-Room: _____ Phone: _____

Department: _____

Do you wish to access the network using a modem from home? _____
(See FAQs @ http://www3.sunysuffolk.edu/faqs/faq.asp for information on connecting from home.)

Network Agreement: I agree to abide by the College's Network Utilization Policy.

Applicant's Signature: _____ Date: _____

Employment Verified by: _____ Date: _____
(To be completed by Human Resources or Division of Academic & Adjunct Services)

Office Use Only:
CIS approval: User-ID created on: by:

Revised 10/06