

# Network & Building Access Request Form

Date:

Please provide the following information, then select the Submit by Email button below. This request form will be attached as a .xml file that you can e-mail to Pam Jonas in the Technology Office.

**Any request to change your building access hours must be approved by the building principal prior to submitting this eForm. If approved, please enter the appropriate changes in the special instructions box below.**

First Name	<input type="text"/>	Last Name	<input type="text"/>
Please select Account Type	<input type="text"/>	Change Requested	<input type="text"/>
Home Campus	<input type="text"/>	Employment Classification	<input type="text"/>
Job Title	<input type="text"/>	Department	<input type="text"/>
Special Instructions:	<input type="text"/>		

## For Technology Office Use Only!

ID/Badge       PowerSchool       Network       E-Mail       Wireless

User Name:  Password:

E-Mail Address:

Computer Name:

Wireless MAC Address:

Access :