SLAC Computer Account Request Form

Complete this form to request new computing accounts. Obtain your supervisor or manager's signature; if neither is available, have a computer czar sign. Email the completed and signed form to account-services@slac.stanford.edu or print and send to the Computing Division, MS 97, or bring to the Account Services office in the Computing building (050), room 107. If this is the first account being requested for the Applicant, the Declaration at the bottom of the form must be signed by the Applicant.

Requestor Informatio	n (SLAC point of contact submitting	the request on behalf of the applicant):	
Name	E	Email	
Applicant Information	1		
Name (last, first, middle initial)	\$	SID#	
Off-site Location: (Off-s	ite users only)		
Institution	Ema	Email Telephor	
New Account Type (se	lect all that apply):		
Windows Unix	Exchange Email	Shared Account (needs special approva	Admin Account (-a)
Requested ID (3-8 charac	cters - please refer to Account Name	Rules for full explanation):	
1st Choice:	2nd Cho	pice:	
SLAC Email (select only o	ne):		
MS Exchange	Unix None (forward to	off-site email address)	
Additional Instruction	s or Special Group Requ	iirements:	OU (Windows)
I have read and understoo agree to use SLAC informa	ation resources only in accordan	Information Resources: Information Resources" dated January 201 Information Resources and dated January 201	tified of new or additional policies on
Authorization: Manager, Supervisor, or Com	puter Czar Name (print) Group Co	ode**: Signature*:	Date (mm/dd/yy):
*The above signature must match **Group Codes are also listed in t		the SLAC Directory or be on the authorized Con	nputing Czar list for computer accounts.
Computing Division Use O	nly		
User ID:	Acct est'd date:	Res Update Date:	Ву:
Password to User Date:	Method:	Ву:	
Unix ID:	User Group:	Date:	Ву:
Windows: AD/OU	Exchange Serv:	Date:	Ву: