TALLADEGA COLLEGE

INFORMATION TECHNOLOGY

Form: IT: ACS: UAA Administrative Computing Services User Account Application

SECTION I: APPLICANTS INFORMATION		
Affiliate Type: Faculty Staff		
First Name	M.I. Last Name	
Department Position:		
Building	bom # Extension]
T.C. E-mail address:		
SECTION II: DEPARTMENT HEAD REOUEST		
Account Action Add Update Terminate (terminate date) Copy		
Account Status Permanent Temporary (expiry date)		
Account Application Access: APARBCBKCAGLLVPCPR POSPSRFA CECUDPGRINNCPGRGSHADDM		
Account Program I.D.: All_Other_(Please specify below in box)		
I acknowledge that the applicant whose name in Section I is an employee of the College and job duties require such		
access to the Administrative System. I understand that all new applicants must complete the "Basic System Operations" course prior to gaining access to the system. (Please have applicant complete IT: TR1:1.0 for training) Signature Date		
SECTION III: AUTHORIZATION FOR ACCESSING OTHER DEPARTMENTAL PROGRAMS		
I authorize the access for the applicant whose name is given in Section I to the application(s)/program(s) specified in Section II. I acknowledge that the applicant's job duties require such access to my departmental application(s)/program(s).	V.P. of Finance Date	
	Dir. of Fin.AidDate	
	Registrar Date	
	Dir. of Admissions Date	
	Dir. of Housing Date	
SECTION IV: USER DECLARATION		
I hereby request access to the Administrative System described above. I acknowledge that the Information Technology Policy & Procedures will apply and I will read and abide by them. Signature Date		
SECTION V: INFORMATION TECHNOLGY USE ONLY		
Username: User #		
I.T. Staff Initials Date Completed:		