



NEW EMPLOYEE ITS SERVICES REQUEST FORM

This form is to be used to request ITS services for employees new to the college. Once completed, return to Beth Sinnwell in CTC 100 or email to beth.sinnwell@wartburg.edu.

Please allow up to 48 hours for services to take effect.

EMPLOYEE PROFILE

Date Requested: _____ Department: _____
Employee's Name: _____ Job Title: _____
Faculty Staff PC Mac

AUTHORIZATION

Supervisor's Name: _____
Signature of Authorization: _____

APPLICATIONS

Please check if employee will use any of the following:

Jenzabar AdAstra PowerFails ImageNow

PHONE

Name of person employee is replacing (if applicable): _____
Office location (please include office number, ex. LH 118): _____

NETWORK SHARE REQUEST

Every employee gets a personal share. However, employee access to group shares must be requested by the supervisor. List the share name(s) below:

ADDITIONAL EMAIL MAILBOXES

Every employee gets a personal email mailbox. However, employee access to additional organizational mailboxes (ex. Admissions) must be requested by the supervisor. List the mailbox name(s) below:

FOR ITS OFFICE USE ONLY

Applications Team Desktop Team Networking Team

ID Number: _____