ENS Network Access Request Form

Name: __________________________________________________________ (Please print)

Office/Lab Location(s): __________________________________________

Office Phone: __________________________________________________

EOHSI Division: _________________________________________________

Status: □ Faculty    □ Staff    □ Other __________________________

□ Student: □ Undergraduate □ Graduate/Fellow

E-mail Address ________________________________________________

□ Full-time □ Part-time □ Temporary: From __/__/__ to __/__/__

Requesting:

□ E-mail Account  (Staff and Faculty only- Rutgers NetID required)

Rutgers NetID: _________________________________________________

□ Shared Drives: List directories to which the user needs access.

______________________________________________________________

Your signature below indicates your acceptance of the following conditions:
EOHSI Active Directory and Zimbra Accounts are for Official EOHSI Business Use ONLY.

User:

User’s Signature Date

Supervisor:

Supervisor’s Signature Date

FOR OFFICE USE ONLY:

ENS Manager: ____________________________ Signature Date

New E-mail: ____________________________@eohsi.rutgers.edu