

## LAN 002: Request for Student Network Account

**Currently enrolled ESCC students** do not need to submit this form. Please fill in completely. Incomplete requests may be denied. Please allow two (2) business days for processing. At least one (1) valid form of picture ID may be required before your request is processed. You must apply in person in order to receive an account.

<b>Personal Information</b>	
Date Submitted	Name (Last, First)
Phone Number	VCCS or ESCC emplid, if any
Email address	
<b>Justification for Account</b>	
<p>Check <b>all</b> that apply. If you are enrolled at another college, you may be required to show dated proof of enrollment, such as a copy of your current class schedule or registration form.</p> <p><input type="checkbox"/> I am currently enrolled in and attending classes at ODU Teletechnet. Please submit this form to the Teletechnet office. An ODU staff member must date and initial this form, verifying your enrollment, here _____.</p> <p><input type="checkbox"/> I am currently enrolled in and attending classes at another college. I have attached a copy of proof of enrollment.</p> <p><input type="checkbox"/> Other, please explain _____</p> <p>_____</p> <p>_____</p>	

By signing below, I verify that to the best of my knowledge, the information on this form is correct. I agree to abide by the ESCC/VCCS Computer Ethics Agreement as explained in the ESCC Student Handbook.

\_\_\_\_\_  
(Requestor signature)

\_\_\_\_\_  
(Date)

IT Department Use Only				
Initials	Submitted	Completed	Status	User name assigned
Acct Activation Date	Acct Expiration Date	Existing Acct? <input type="checkbox"/>		Password reset on old account? <input type="checkbox"/>
Group Membership				

All documents created during the fulfillment of this request, such as emails, are to be retained along with this form.