

BHSU Network Access Application

Employee Information (Must be filled out completely)

Employee Name: (Last, First, Middle) _____	Date: _____	Time: _____
Department/School: _____	Office Phone: _____	
Supervisor's Name: _____	Office Location: _____	
Supervisor's Signature: _____	(Supervisor's signature is required for approval.)	Working Title: _____
	Colleague ID #: _____	

Employee Status (Please select one of the following.)

- Faculty Adjunct Faculty Rapid City Area Staff Student Employee

Access Requested (Please check all that apply.)

Is this request for a change to an existing account or for the creation of a new account? Existing New

Faculty/Staff Network (computer/Internet access only) Faculty/Staff Email Student Network Student Email

Other: (Please Specify) _____

Password *(If off campus only.)

Must be minimum eight (8) character password that contains 3 different characters (number, special character, uppercase or lowercase). Your temporary password will be set to "Bhsu@1883" and you will be required to select a minimum eight (8) character alphanumeric password at your first logon.

Applicant's Signature (The applicant's signature is required.)

By signing this document, I signify that I have read, understand, and agree to abide by SD BOR Information Technology Appropriate Use Policy ("AUP"). This policy is located at <http://www.bhsu.edu/AboutUs/Policies/SDBORAppropriateUsePolicy/tabid/9708/Default.aspx>.

Applicant's Signature: _____ Date: _____

For Network & Computer Services' Use Only

Account created by: _____ Date: _____ Time: _____

Notification given by: _____ Date: _____ Time: _____

Please return this form to: Network & Computer Services

Incomplete forms will be denied access. **Please allow three business days for account creation.** Direct any questions regarding your application for computer access to Network & Computer Services at 642-6580. Return form to Network & Computer Services, 1200 University Street Unit 9665, Spearfish, SD 57799, Library 007, or fax to 642-6660 with hand written signature. **Form must be complete with all information.**