



NEW USER ACCOUNT AND IT EQUIPMENT REQUEST & RECEIVE FORM

EMPLOYEE INFORMATION

REQUESTER NAME:	BADGE NO:
POSITION / JOB TITLE:	DATE:
DEPARTMENT:	TEL:

SERVICES REQUIRED

IT SERVICES USE ONLY REMARKS

◆	User Account	<input type="checkbox"/>	
◆	Email Access	<input type="checkbox"/>	
◆	Blackboard Access	<input type="checkbox"/>	
◆	Workstation	<input type="checkbox"/>	
◆	Laptop	<input type="checkbox"/>	
◆	Personal Printer	<input type="checkbox"/>	
◆	Scanner	<input type="checkbox"/>	
◆	Document Management System	<input type="checkbox"/>	
◆	File Sharing Access	<input type="checkbox"/>	
◆	MS Visio	<input type="checkbox"/>	
◆	MS Project	<input type="checkbox"/>	
◆	MS Publisher	<input type="checkbox"/>	
◆	MS One Note	<input type="checkbox"/>	
◆	SPSS	<input type="checkbox"/>	
◆	Mysis	<input type="checkbox"/>	
◆	Acrobat Professional	<input type="checkbox"/>	
◆	Adobe Photoshop	<input type="checkbox"/>	
◆	OTHERS, Specify:		
	JUSTIFICATION		

AGREEMENT: I agree to the terms and policies of use

Note: First time requesters are required to sign form "A – 23b" for Internet and Email User Agreement (See last page)

Name:

Signature:

MANAGER APPROVAL (DEPARTMENT HEAD)

NAME	SIGNATURE	BADGE NO	DATE



FOR IT SERVICES DEPARTMENT USE ONLY

MANAGER APPROVAL

APPROVED

DISAPPROVED

COMMENTS:

Name	Signature	Date
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ADMINISTRATION - USER & EXCHANGE CREATION

◆	USER NAME	
◆	INITIAL PASSWORD	This is a temporary password which will be asked to change by the user at first logon.
◆	DOMAIN	
◆	CREATED BY	SIGNATURE
		DATE

ASSIGNED EQUIPMENTS

AVAILABLE

NOT AVAILABLE

NEW EQUIPMENT ASSIGNED INFORMATION

◆	CPU	MODEL	
		SERIAL NO	
		ITS NO	
◆	MONITOR	MODEL	
		SERIAL NO	
		ITS NO	
◆	PRINTER	MODEL	
		SERIAL NO	
		ITS NO	
◆	OTHERS		

SOFTWARE INSTALLED

◆	APPLICATION MATRIX	
◆	SOFTWARE MATRIX	



◆	INSTALLED BY	SIGNATURE	DATE
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NETWORK CONFIGURATION

◆	COMPUTER NAME	
◆	IP ADDRESS	
◆	MAC ADDRESS	
◆	NETWORK PORT	

CHECKLIST

◆	Software Matrix	<input type="checkbox"/>	
◆	Network Connectivity	<input type="checkbox"/>	
◆	Internet Access	<input type="checkbox"/>	
◆	Anti Virus (Client Security)	<input type="checkbox"/>	
◆	Windows Updates	<input type="checkbox"/>	
◆	Inventory Updates	<input type="checkbox"/>	
◆	Printer Configuration	<input type="checkbox"/>	
◆	Sharing Access	<input type="checkbox"/>	
◆	Outlook Configuration	<input type="checkbox"/>	
◆	User Logon	<input type="checkbox"/>	

ISSUED & INSTALLED BY

◆	NAME		BADGE NO	
◆	SIGNATURE		DATE	

END USER ACKNOWLEDGEMENT

I, the undersigned hear by declare that all the above items have been received in working order and will be used according to the college policies.

Name: _____ Signature: _____

NOTE: PLEASE RETURN THE FILLED FORM WITH A PHOTOCOPY OF YOUR BADGE TO THE ITSERVICES DEPARTMENT
IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HELPDESK EMAIL helpdesk@ksau-hs.edu.sa PHONE EXTENSION 41036.



INTERNET AND E-MAIL USER AGREEMENT

I have read the University Internet and Email Usage Policy (<http://com.ksau-hs.edu.sa/its/images/Policy & Procedures/Internet and E-mail Usage Policy.pdf>).

I recognize and understand that the university's Internet and E-mail systems are to be used for conducting the university's business only. I understand that use of this equipment for private purposes is strictly prohibited.

As part of the University and use of KSAU-HS gateway to the Internet and E-mail system, I understand that this Internet and E-Mail Usage Policy applies to me. I have read the aforementioned document and agree to follow all policies and procedures that are set forth therein. I further agree to abide by the standards set in the document for the duration of my employment with the university. I understand that Internet and E-mail usage may be monitored by the university to ensure compliance with the Internet and E-Mail Usage Policy.

I am aware that violations of this Internet and E-Mail Usage Policy may subject me to disciplinary action. I further understand that my communications on the Internet and E-mail reflect the university worldwide to our faculty, students, customers and suppliers. Furthermore, I understand that this document can be amended at any time.

Employee's Printed Name

Badge No.

Department

Employee's Signature

Date