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| --- | --- |
| DATE (MM/DD/YYYY) | / / |
| TYPE OF REQUEST | Request for a new Office 365 account (new employee or student)  Request to reset password (forgotten password)  Failed to verify account (lost phone/inactive phone number) |
| FULLNAME |  |
| COLLEGE OR OFFICE |  |
| STUDENT NO  OR EMPLOYEE ID |  |
| OFFICE 365 USERNAME  (IF REQUEST FOR NEW ACCOUNT ENTER N/A) |  |
| EMAIL ADDRESS |  |
| **Received by:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature over printed name | |