

Pasadena City College

CONSULTANT NETWORK ACCOUNT APPLICATION FORM

CONSULTANT COMPLETES

NAME: (Please Print TITLE:

PHONE: LOCATION:

NEW ACCOUNT Name Change

Current Name:

Services Requested:

PCC Staff Email Staff Computer Login Network Share Access

If applicable, please include existing network share drive name and requested access level (read-only or read/write):

DEPT/DIVISION: EXTN:

DEPARTMENT MANAGER COMPLETES

Consultant Contract Expires:
Expire account on this date:
Department Name:
Department Manager Approval: (Please Print and Sign)

INFORMATION TECHNOLOGY SERVICES COMPLETES

PCC Staff Network Account Name

FN Initial MI or X if none Last Name @pasadena.edu College's email

ITS Director Signature Date access added

Notes/changes: