# Sam Houston State University

**Computer Account Request Form**

Contact: IT@Sam Service Desk
(936)-294-1950 or Helpdesk@shsu.edu

IT@Sam Communicate + Collaborate

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**All fields must be completed before an account can be created. Please place an IT@Sam work order for web accounts.**

**Type of Request:**
☐ Nell
☐ Department Shared Email Box
☐ Visitor Account* (Available for a maximum of one year)

**If you checked Visitor, please explain your need for a Visitor Account.*

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**Applicant's Information:**

Name: _____ _____ _____
First Name MI (Required) Last

SamID Number: _____ Campus Phone: _____

Department: _____

Current SHSU Username (if applicable): _____

**Applicant's Status:**
☐ Faculty ☐ Staff ☐ Student Employee

**Acceptance Agreement:**
*By signing below I certify that the usage of this computer account is for official service of Sam Houston State University, and that I have read, understand, and will abide by the University Computer Use Policy* (http://www.shsu.edu/~ucs_www/policies/aup.html).

*I also acknowledge that as a Sam Houston State University employee I am governed by the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment, FERPA) which ensures the confidentiality of student records. Release of student information without the written consent of the person identified in the document is a violation of Sec. 438 Public Law 90-247.*

_____ _____
Applicant's Signature Date

_____ _____ _____
Dept. Head Signature (Dean/VP required if Visitor request). Date Email (for notification)

**** If you are requesting a Visitor account, both signatures are required. Visitor accounts will only be active for a maximum of one year.***

Campus Mail: Box 2449 or Fax to: x4-1231

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Received By:_____ New Username (if applicable): _____