

Network Access Request Form

This form is to be completed and returned to the Technology and Computer Services Department located on the 1st floor of the Dickerson-Johnson Library. Please print clearly and fill out the form completely.

Date: _____

Part I. Student Information

First name: _____ Last name: _____

Student ID number: _____ E-mail address: _____

Part II. Dormitory Hall (Please circle one.)

a. Moore Hall b. Friends Hall c. Gambrell Hall d. McLaurin Hall

Dormitory phone no.: _____ Room number: _____ Network drop # _____

Part III. Type of computer (Please circle one.)

Desktop PC Laptop

Operating system: Check one.

_____ Windows 98 _____ Windows Me _____ Windows XP

_____ Other: _____

Network card information:

MAC address: _____:_____:_____:_____:_____:

It is the responsibility of the student to ensure that they are running an anti-virus program on their PC or laptop. They must have the latest Windows updates installed. Failure to do so may prevent access from being granted to the campus network or possibly being disconnected from the campus network.

It is not the responsibility of the Technology and Computer Services Department to maintain a student's computer.

By completing and submitting this form, I agree to abide by all usage policies governing the Coahoma Community College campus network.

Signature: _____ Date: _____