Southwestern Oklahoma State University

Office Move/Telephone Change Notification

(Use for office moves and miscellaneous changes)

Send the completed form to ITS HelpDesk

Preparer's Name: _____ **Date of Request:** _____

Preparer's Telephone Number: _____

Effective Date of Change: _____

Signature of Department Head: _____

ITS Department Use Only

AD Account:

Phone Dir./Webpage:

Comp. Inv.:

VAX Room Number:

Fax to Steve:

Last Name _____ **First Name** _____

From:

Ext. Number _____ **Dept** _____ **Building** _____ **Room** _____

To:

Ext. Number _____ **Dept** _____ **Building** _____ **Room** _____

Other telecommunication requests not listed above (e.g., line and feature assignments on a multiline set)

_____

_____

_____

Computer Moves: If computer is also moving, list information below:

SWOSU Tag Number: _____

_____

_____