



## **Request for User Account**

Name:	Employee ID:
School/Center/Unit:	AIT Tel. No:
Alternative Email Address:	
Period requested: From To:	
Account Category:	
☐ Faculty ☐ Staff ☐ Adjunct Faculty ☐ Wor	rk Provider
Preferred Login Name	
<ol> <li>Login name cannot contain special character except dash (-)</li> <li>Login name of faculty/staff/adjunct faculty/work provider must be derived from his/her personal's name only.</li> <li>For Adjunct Faculty and Work Provider, please attach the appointment letter/contract.</li> </ol>	
Requestor signature:	Date:
For Official Account Category Only	
Approved by Dean/Center Director/Unit Head:	
	Date:
For ITServ Only	
Approved by:	Date:
Completed	Date:
Doc. No.:	