



TODAY'S DATE		EFFECTIVE DATE	
EMPLOYEE NAME			
PHONE NUMBER			
DEPARTMENT			
SUPERVISOR			
POSITION			

SELECT ONE ☐ NEW ACCOUNT ☐ EDIT EXISTING

WILL THIS USER NEED THEIR OWN PC/LAPTOP? ☐ YES ☐ NO

IF YES, WHERE WILL THIS SYSTEM BE SET UP?

IF NO, WHICH MACHINE WILL THE NEED TO LOG ON TO? SPECIFY LOCATION AND OTHER USER(S) OF MACHINE TO BE SHARED

WINDOWS ACCOUNT REQUIRED? ☐ YES ☐ NO

ERP (VISUAL/NETSUITE) ACCOUNT REQUIRED? ☐ YES ☐ NO

IF YES, WHAT ROLE DO THEY NEED:

DOES THE USER REQUIRE AN EMAIL ACCOUNT? ☐ YES ☐ NO

IF YES, LIST ANY DISTRIBUTION GROUPS NEEDED

PLEASE LIST ANY ADDITIONAL HARDWARE OR SOFTWARE THAT THIS EMPLOYEE WILL REQUIRE (e.g. CATIA VIEWER, ETC).

HR APPROVAL: _____
SIGNATURE REQUIRED

MGR APPROVAL: _____
SIGNATURE REQUIRED

SUBMIT THIS FORM TO THE HR DEPARTMENT—DO NOT SUBMIT TO IT DEPARTMENT