

**UNIVERSITY SYSTEMS AND SECURITY**

**ELLUCIAN COLLEAGUE ACCOUNT REQUEST**

Use blue or black pen to fill out form. Requests for Ellucian Colleague accounts must be sent to Joe Brancone in MIS at T-BH2-03. Your request can also be e-mailed to Joe at brancone@fdu.edu.

Please see back of form for further instructions.

Sec. A Employee / Student

Name: \_\_\_\_\_ ID# \_\_\_\_\_  
  First Name  M.I.  Last Name

Address: \_\_\_\_\_ Apartment # \_\_\_\_\_  
  Street    
\_\_\_\_\_ (                      )  
  City  State  Zip  Home Phone

- Student: \_\_\_\_\_ FDU Phone Ext \_\_\_\_\_  
  Department/Major
  
- Faculty/Staff: \_\_\_\_\_ FDU Phone Ext \_\_\_\_\_  
  Department
  
- COLLEAGUE: MIS Approval: \_\_\_\_\_

Sec. B

User's default printer: \_\_\_\_\_

(If no printer, then enter default)

Please model applicant security after (other user name): \_\_\_\_\_ OR

Please assign the above applicant to the following security tracks: \_\_\_\_\_

\_\_\_\_\_  
Please attach another sheet if more security classes are to be assigned.

Sec. C

Usage of FDU's computer and networking facilities acknowledges that you have read and agree to abide by the terms and conditions of FDU's Acceptable Use Policy. Copies of the policy may be obtained on-line.

**I have read the FDU Acceptable Use Policy and agree to the terms and conditions thereof.**

(Supervisor signature required for Colleague request)

Signature: \_\_\_\_\_ Supervisor Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Sec. D Computer Center Use Only  
Created by: \_\_\_\_\_ Date: \_\_\_\_\_  
Username: \_\_\_\_\_ Group: \_\_\_\_\_  
Node: \_\_\_\_\_ Renewed:

MIS Use Only  
Username: \_\_\_\_\_ Printer: \_\_\_\_\_  
Options/Proto User: \_\_\_\_\_  
Date: \_\_\_\_\_ Priority: High  Normal

## **DIRECTIONS FOR FILLING OUT THIS FORM**

### **SECTION A:**

Please fill out this section completely. When applying for a Colleague account, please list what department you are working for and your campus. **Do not enter your Social Security Number.**

### **SECTION B:**

This section is to be completed by the Colleague module administrator in Enrollment Management, Student Affairs or Finance. Please enter the applicant's default COLLEAGUE printer (found in Ezspooler). If the person will not be printing from Colleague, enter 'Default' in the space provided. The module administrator should fill in which security tracks the applicant should have or enter another Colleague user's name after which to model the applicant's security.

### **SECTION C:**

The applicant must sign and date the application in this section. Please be sure to read FDU's Acceptable Use Policy, which is available on-line at [isweb.fdu.edu/policies/accept\\_policy.html](http://isweb.fdu.edu/policies/accept_policy.html). The supervisor must sign in the space provided.

### **SECTION D:**

Ignore this section as this is for the use of the Computer Center and MIS staffs.