

Information Technology Services

PRIVILEGED ACCOUNT REQUEST FORM - STAFF

	SECTION I -De	partment Head	
First Name:		Last Name:	
Title:		E-Mail:	
Phone Ext:		Department	
	SECTION II - Us	ser Information	
First Name:		Last Name:	
Title:		E-Mail:	
Phone Ext:		Department/ Office Number:	
	SECTION III -	Account Type	
ITS Privileged	NISTRATOR* (*Please provide CNU Asset	Asset ID	DELL Service Tag or MAC ID



SECTION IV - Account Usage Agreement

The following agreement applies to all requests: I understand and agree to the following Terms and Conditions:

- This account will only be used when performing actions that absolutely require local administrator rights. All other activities will be performed under my regular user account.
- Only properly licensed software is to be installed on this workstation. Licensing information for any copyrighted software
 must be forwarded to the ITS Helpdesk, where it will be available to Commonwealth auditors on request. (If you need
 assistance with this procedure or would like to purchase software, please contact the Helpdesk.)
- No new local-user-access accounts will be created nor existing accounts elevated. (In the event such additional accounts are needed, please contact the Helpdesk.)
- Any hardware modifications, deletions or additions to University computer equipment must be conducted by IT Services. Peripheral equipment including printers, USB-devices. and PDAs are not restricted by this provision.
- Software installed by the University will be neither modified nor removed.
- Network settings will not be modified. (The addition of Wireless Networks is allowed)
- 1. **Enforcement:** I acknowledge and agree that any breach of this Agreement by me will cause harm to the University and/or its employees or students. I agree that if I commit a breach of this Agreement, that Christopher Newport University shall have the right to take disciplinary action against me and to otherwise enforce this Agreement.
- 2. By signing this agreement, user agrees to follow <u>Christopher Newport University Acceptable Use Policy</u> and the above Account Usage Agreement.

Applicant Signature	Date	Supervisor Signature	Date	
		CHNOLOGY SERVICES Approved Denied		
ISO Approval Signature:	•	, ,		
Completed By: Technic	ian Name:		Date:	