

Customer Online Access (COLA) Interdepartmental Communications Request (ICR) Application Access Request Form

Date: _____

Organization Name: _____

Organization Number: _____

Contact Person: _____

1. The listed user(s) below will have access to: a) review information about telecommunications services provided to your department by NI&S; b) submit requests to NI&S for new telecommunications services and to change existing service; and c) cancel telecommunications services.
2. The individual authorized (HokieMart Approver) to spend departmental funds will still be required to sign each ICR. No action will be taken on an order until the signature has been verified by Network Infrastructure & Services.
3. Network Infrastructure & Services retains audit data on all ICR and Work Orders.

Individual(s) authorized to have access to the Interdepartmental Communications Request (ICR) Application (please print):

NAME

PID

NAME	PID

Authorizing Name *(Must be HokieMart Approver)*

Signature

Date

NOTE: *This form is to be signed by the individual authorized to spend departmental funds. Return form to NI&S Customer Support Services (0506).*