



COPY CENTER USER AUTHORIZATION FORM

This form is used to grant approval to use the Copy Center On-Line Program. Once you have completed this form and it is signed by your department head, please return to Jo-Ann Myers by mail in Marcus White 006 or fax to X22522 and you will be added to your department's list of authorized users to use the Copy Center On-Line Program.

First Name:	
Last Name:	
Campus E-Mail Address:	
Extension:	
Department:	
Building/Room:	

Signature of Department Head or Designee

Date Approved

PLEASE ALLOW UP TO TWO WORKING DAYS FOR ACCESS TO BE GRANTED

Special Note:

To use the Copy Center On-Line Program you must have a BlueNet ID. Forms to request this account are available on the Information Technology Services website at <http://www.ccsu.edu/its/> under the heading of "Request A BlueNet Account".

Rev. 08-07