



REQUIRED INFORMATION (Please PRINT Clearly)

Guest accounts are limited to maximum 30 days of access.

NOTE: An incomplete form will not be processed.

Name: (First) (MI) (Last)

Your Company Name: Company Phone:

Your email address:

Visiting Campus Location: (Please Circle One) Moore County | Fayetteville | McMinnville | Smyrna

Purpose of your visit to Motlow:

Motlow Building Name and Room Number:

Name of Motlow Personnel/Department/Division assisting you: Phone:

Requested Start Date: Requested End Date:

Account Type: (Please Circle One) Non Motlow Employee OR Outside Contractor for Motlow

Are you requesting: (Please Circle One) Computer access | Wi-Fi access | Computer and Wi-Fi access

Supply Reason for Account:

* This form must be received by Motlow's IT department within 2 business days before event date. If IT does not receive this form within the 2 business days before event there is no guarantee you will have computer or Wi-Fi access while on a Motlow campus. Your password will be sent to the email you provided. Responsibility shall fall upon the organizer or requestor of event being held at Motlow College.

Your username will be the first initial of your first name plus your complete last name followed by the first 3 letters of your company name. Example: jsmithWAL (Wal-Mart) or jsmithMTS (Middle Tn. State University)

I will comply with the policies of Motlow State Community Colleges as outlined in the Acceptable Use Policy and the ISP Plan and the Technical Operations Computer and Network Use Policy, located online at http://www.mscc.edu/itts/computer_use.aspx.

Print Name of Requestor Requestor's Signature Date

STOP. AUTHORIZATION BELOW BY TECHNICAL OPERATIONS PERSONNEL ONLY

Approved Username: Password:

CIRCLE ONE: This account was created in: Active Directory (computer access) or Lobby Admin (Wi-Fi access)

Print Name of Account Creator Account Creator's Signature Date