

Pre-Employment Network Account Authorization Form
Eastern Mennonite University

In some instances, it is necessary for an individual to have network/email account access in the weeks or months prior to employment. The purpose of this form is to create a mechanism to authorize the start of this process. This form must be filled out by the hiring supervisor and completed within a reasonable timeframe prior to the actual first day of employment. In conjunction with this form, the individual must complete the Employee Information Form, included on the next page or at www.emu.edu/humanresources/forms. After human resources has received both forms we will contact the hiring supervisor and information systems authorizing them to proceed. The hiring supervisor will then be responsible to fill out the necessary network account request form from the information systems department.

New Employee:

First Name: _____ Last Name: _____
ID Number (if known): _____

Department: _____ Position: _____
Expected Employment Date: _____
Reason for early account access: _____

Supervisor:

First Name: _____ Last Name: _____

Supervisor Signature: _____ Date: _____

*****Human Resources Use Only*****

Approved: Yes No

Approved by: _____

Date: _____ EAD: _____