



New Employee Technology Request Form

Supervisor Name:

Department:

Name of New Employee

Today's Date:

Start Date for New Employee:

Name of prior employee in this position:

Employee Information

Position Title:

Office Location:

Use Existing Computer in Place: Yes No

Resources Needed: Computer Laptop
 Docking Station Tablet

Network Resources

Shared folders required:

What permissions are required? Read Write

Phone

Phone in Place: Yes No

Current extension:

Colleague / Image Now

Access Required: Yes No

If yes, download and complete the access form [here](#). Return completed form to the Human Resources Department.

ECC IT Help Desk

Please list any additional information, special circumstances or requests: i.e., zoom account, specific distribution lists.