SPONSORED ACCOUNT REQUEST FORM

All sponsored accounts require approval by Department Head and IT Services.

**Sponsor Information- Please Print Clearly (sponsor must be an active LIT employee)**

*(ALL FIELDS ARE REQUIRED)*

Sponsor Name: ____________________________________ Sponsor LIT ID: __________________
Sponsor LEA username: ____________________________ Sponsor Phone: __________________
Sponsor Department: ___________________________ Sponsor Affiliation (faculty/staff): ______________
*Sponsor Department Chair/Director: ____________________________
*Must be different from Sponsor*

**Service Requested- Please indicate action below**

[ ] LEA

**User Account Information**

First Name: ____________________________ Last Name: ____________________________ MI: _____
Preferred Phone: ________________ Preferred Email (non-Lamar): ____________________________

**Affiliation:** [ ] Retiree  [ ] Contractor/Vendor  [ ] Researcher  [ ] Class Audit
[ ] Visiting Scholar / Professor  [ ] Other (please specify)______________________________

**Account Duration**

Account Begin Date: _____________________ Account End Date: ________________________

**NOTE:** *This sponsored account is valid for the duration requested up to one (1) year from request date. You must request account reauthorization prior to the end date or the account will be deactivated.*

Instructions to fill out the form:

1. Please fill out all information requested, incomplete forms take longer to process.
2. Completed forms must be scanned in with all signatures and emailed to servicedesk@lamar.edu Attn: Infrastructure Services.
3. The initial credentials will be given to the requested user.
4. All passwords are subject to Lamar University Password policy and are required to be changed at first login.
Required Signatures

**Sponsor signature indicates that:**

I understand that this account request is in direct support of the mission of LIT.
I understand to comply with established institutional privacy policies and published information technology policies.
I understand that the sponsor takes all responsibility for activities on the sponsored LEA account.

Account Sponsor: ___________________________ Date: ________________

**Department Chair/Director’s signature indicates that:**

[ ] I authorize IT Services to facilitate the access requested for the duration requested and understand the risks associated.

Department Chair / Director: ___________________________ Date: ________________

**Information Technology Services Use Only**

Approved by (print name): ___________________________

Signature: __________________________________________ Date: ________________

Assigned Username (LEA): __________________________ Request #: __________________
Information Section

The request process for sponsored email accounts requires that the sponsor do the following:

1. Open a Service Ticket with Lamar’s IT Service Desk (880-2222 or servicedesk@lamar.edu)
2. Complete a “Sponsored Account Request Form” (see pages 1 and 2)
3. Provide information about the sponsor and sponsoring department
4. Provide information about the account holder.
5. Explicitly agree to accept ALL responsibility for:
   a. holder account access and privileges,
   b. assure that the account holder is aware of and intends to follow applicable LIT/LU appropriate use policies, and any/all activity undertaken by the account

6. Certify the above through appropriate signatures from the responsible parties for that account (e.g., department chair, director, etc.)
7. Deliver the completed form to IT Service Desk via email, campus mail, or hand delivery. IT Services will process this request and respond either approving the request by providing the account name and password as requested, or denying the request and explaining why.

For an approved request, the sponsor accepts all responsibility to manage the account as follows:

- communicate user privileges to account users
- educate users on appropriate use of the account

*NOTE: This page is for your records only and does not need to be submitted with the above request form.*