



COMMUNICATIONS REQUEST FORM: TISCH ASIA SINGAPORE

You must complete all of the information requested in Part I. Use Part II for phone-related requests, and Part III for computer and data related requests. Please use only one form per recipient. For requests involving more than 3 people, complete sections 1 and 3 on page one and submit the form along with a spreadsheet that lists all recipients and the services that are required.

Print clearly or type. **Submit completed form to the fax number or email address provided on page 3.** Allow 10 business days for work to be completed. For help, please see page 3.

PART I: Required Information — This form can not be processed without all of the information on this page.

Today's Date: ___ / ___ / ___ **Date Services Are Required:** ___ / ___ / ___ **Your own tracking # (optional):** _____

1. Contact Information	<p>a. _____ Communications Representative (please PRINT name) NetID Telephone #</p> <p>b. _____ Person to contact about this order, <i>if different from above</i> (please print name) NetID Telephone #</p>																																	
2. Recipient Information	<p>a. Which of the following categories best describes the intended recipient of these services? <input type="checkbox"/> New employee <input type="checkbox"/> Existing emp., new location <input type="checkbox"/> Existing emp., new dept. <input type="checkbox"/> Existing emp., existing location, new svcs <input type="checkbox"/> Services are not for a recipient (e.g., vacant location)</p> <p>b. _____ Person who will be the recipient of these services (please print name). If services are intended for a <i>location</i> rather than a recipient, please write "Vacant" here and skip to #2d.</p> <p>c. _____ Recipient's NetID* NYU E-mail Address Telephone # (if known)</p> <p>d. _____ Recipient's CURRENT Affiliation (if no recipient, use your own) School/Division Department HR Dept. #</p> <p>e. Is the recipient moving to a new department? If so, check here <input type="checkbox"/> and complete the following: _____ Proposed/Future School/Division Department HR Dept #</p>																																	
3. Account & Approval Information	<p>a. _____ Budget Officer (please print name) Budget Officer Signature</p>		A schedule of Communications fees is available at www.nyu.edu/its/telephone/staff/help.html																															
<p>b. What account(s) should be billed for the service(s) you are requesting?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 10%;">Account</th> <th style="width: 10%;">Fund</th> <th style="width: 20%;">Organization</th> <th style="width: 20%;">Program</th> <th style="width: 10%;">Project</th> </tr> </thead> <tbody> <tr> <td>• Monthly Charges</td> <td> 6 5 5 5 1 </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>• One-Time Charges</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>• Authorization/Long Distance Code Charges</td> <td> 6 5 5 5 2 </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>• Network Charges</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>						Account	Fund	Organization	Program	Project	• Monthly Charges	6 5 5 5 1					• One-Time Charges						• Authorization/Long Distance Code Charges	6 5 5 5 2					• Network Charges					
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* NetIDs are normally assigned through HR processes. If, however, you do need to request a NetID, send the recipient's name and NYU ID# to its.accounts@nyu.edu.

PART II: Telephone Services — Complete this page if you require one or more of the telephone services below.

Today's DATE: ____ / ____ / ____

Your own tracking # (optional): _____

4. Phone Services

If you are requesting services for an existing phone, please ENTER PHONE NUMBER HERE: _____

Services in this section will be provided to the phone jack you indicate in #5, below.

a. Select the option that best describes your phone and/or service needs:

- | | | |
|---|--|--|
| <input type="checkbox"/> Install a NEW phone | <input type="checkbox"/> CHANGE the NAME used with an existing phone | <input type="checkbox"/> DOWNGRADE an existing phone |
| <input type="checkbox"/> REMOVE an existing phone | <input type="checkbox"/> UPGRADE an existing phone | <input type="checkbox"/> DOWNGRADE & RELOCATE an existing phone |
| <input type="checkbox"/> RELOCATE an existing phone | <input type="checkbox"/> UPGRADE & RELOCATE an existing phone | <input type="checkbox"/> Have special instructions? Use NOTES on page 3. |

b. If you selected "NEW," "UPGRADE," or "DOWNGRADE" above, please select a new service or phone model below. Information about each phone model is available at: <http://www.nyu.edu/its/telephone/features.html>.



- Desk
- Wall

Model # 2500
Single Line



Model # 2420
24-button w/ display

Phone Line Services

- Request a Fax Line
- Request a Modem Line

5. Location of Phone Jack to be Used

a. Present Phone Location

Building: _____

Floor #: _____ Room #: _____

Jack Number (e.g., 10-A1-007): _____

b. Proposed Phone Location

Building: _____

Floor #: _____ Room #: _____

Use existing jack: # _____

Install a new jack

Moving? If recipient is moving and you need to remove an existing phone from the proposed location, fill out a separate copy of this form.

6. Voice Mail Services
(Select either a, b, c, or d)

a. Add voice mail:

- When I can't answer the phone: (select one)
 - After ____ rings (2-6), the call should go directly to my voice mail.
 - After ____ rings (2-6), the call should route to extension _____ and then to my voice mail.
- [Optional] If a caller presses 0 while in voice mail, the call should be sent to extension: _____.

b. Remove voice mail

c. Reset voice mail password

d. Reset voice mailbox to DEFAULT settings* (includes password reset)

Please enter the NYU email address of the person to whom we may send the voice mail instruction letter: _____

7. Long Distance/ Authorization Code Services

If long distance services are required, please select one option in each section.

- HOLD FOR PICK UP (or complete #7d)
- More than one authorization code is required. Use Notes section on p. 3 to provide recipient names, chart fields, work type, and calling areas and times.

a. Specify Work Type (select one)

- New Auth. Code User
- Change in Calling Area
- Change in Chartfield
(List old & new acct. #s in Notes on p. 3)
- Cancellation

b. Authorized Calling Areas (select one)

- Tri-State Area codes: 201, 732, 973, 609, 908, 203, 516, 845, 631 & 914
- U.S., Canada, Caribbean
- All Domestic and International Area Codes

c. Authorized Calling Times (select one)

- 24 hours a day, 7 days a week
- Restrict calls to M-F, 8:00 am-8:00 pm

d. Name and address of recipient: _____

Name

Dept

Bldg

Fl/Rm

* Resetting the mailbox to default settings is suggested for new employees or existing employees taking over a new position.

