

Los Angeles City College Administrative Services "How To Book"	Information Technology Department	VII
		B-3-2
Sample Request for Internet Access in Labs, Classrooms or Offices for Faculty & Personal Laptop.		



**REQUEST FOR INTERNET ACCESS IN LABS,
CLASSROOMS OR OFFICE FOR FACULTY
PERSONAL LAPTOP**

Fill in all required information below

If laptop will be used in multiple locations, specify all locations.

Write N/A if lab has no Instructional Assistant assigned to the location

Submit completed form to IT Department AD-107

Requestor Information	
Request Date	9/2/2008
Full Name	James L Johnson
Employee #	667151
Laptop Hostname (*)	AD11 - JohnsonJL
Laptop MAC Address (*)	00-16-35-68-2A
Laptop Current Antivirus Software	McAfee
Department	Business Office
Location (s), building & room	LACC, AD111
Location Type	<input type="checkbox"/> Lab <input type="checkbox"/> Classroom <input checked="" type="checkbox"/> Office <input type="checkbox"/> Other_____
Contact Phone	x2066
E-mail Address	JohnsonJL@lacitycollege.edu
Lab Instructional Assistance Name	N/A
Requestor Signature	
Notes	N/A

IT USE ONLY

IT Staff	
Console IP Assigned	
Console Hostname	
IP+MAC Console Confirmation	
Switch/Port/Vlan	
Notes	
Completion Date	

(*) If you need assistance getting the information, please ask Instructional Assistant in the assigned lab or call TSSHelpDesk at x2049.

