



Office of Information Technology

Request for Sponsored AUBnet User Account

FOR AUB EMPLOYEES' USE TO SPONSOR ACCOUNTS OF NON-EMPLOYEES

To be completed by requester *(Employee on behalf of – Highlighted fields are required)*

New User First Name		User Phone	
New User Last Name		Permanent Email (if any)	
Role at AUB	<input type="checkbox"/> Visiting Faculty <input type="checkbox"/> Visiting Researcher <input type="checkbox"/> Consultant <input type="checkbox"/> Contractor <input type="checkbox"/> Visiting Student <input type="checkbox"/> Special Program Student <input type="checkbox"/> Campus Resident <input type="checkbox"/> Other		
Account Activation Date	<input type="text"/>	Termination	<input type="text"/>
		Duration in Months	x <input type="text"/> Month(s)
Request Justification & Comments			User Signature Date

To be completed by AUB Sponsor/Family Member *(Head of the department that will be charged for the service - All fields are required)*

Sponsor First Name		Sponsoring Dept.	
Sponsor Last Name		Sponsor Phone	
Sponsor Title		Sponsor Email	
Sponsor Signature		Date	

Please mail or deliver by hand the completed and approved form to IT Help Desk