

New Employee IT Setup Form

Department: _____

Employee's Name: _____

Job Title: _____

Start Date: _____

Should the employee have a countyofglenn.net email address? Yes No

New Employee's Role:

This is a new (or modified) role. Please list permissions and Program Access:

Taking over an existing role, if so who? _____

Phone Extension: _____ **Direct Line Phone Number:** _____

Additional Details.

This person needs a dedicated desk phone

This person needs a specialized printer setup

This person needs a specialized scanning setup (e.g. scan-to-email or scan-to-folder)

This person needs website editing capabilities for their department

Will this person work at other County Sites/Offices on a regular basis (i.e. a mobile employee)?

Yes, this person will be a mobile employee that moves between offices regularly or out in the field on a regular basis

No, this person will primarily work from a single office

Notes:

IT Setup Authorized by:

Signature

Name

Date