

**WYANDANCH UNION FREE SCHOOL DISTRICT
OFFICE OF TECHNOLOGY**

New Computer/Email Account Request Form

Employee Name: _____

Building(s) Assigned To: _____

Title: _____

Grade/Department: _____

Employee ID#: _____

Permanent/Full Time Employee:

*Substitute Employee: Dates Assigned: _____

*Student Teacher: Teacher Assigned To: _____

Dates Assigned: _____

Administrator's Signature: _____

PLEASE NOTE: Student Teachers do **NOT** receive accounts. All accounts are subject to the approval of the Wyandanch Human Resources Department and **all employees MUST be Board of Education Approved before an account can be created.**

**** PLEASE FAX THIS FORM TO THE TECHNOLOGY DEPARTMENT @ 510-3139 ****

The Technology Department will complete this portion and return to the employee.

Your request was processed on: _____

Your User ID is: _____

Your Password is _____

Your Email Account is: _____@wufsd.net

***** Please change your password A.S.A.P. In order to do this, you must make the change in your email account *****