

# Telephone (NeTel) Privileges Request Form

(Fax Completed Form to NeTel at x4000 or email to [telewo@mm.isu.edu](mailto:telewo@mm.isu.edu))

Who is service for (Name): \_\_\_\_\_ Bengal ID Number: \_\_\_\_\_

Position Title: \_\_\_\_\_

Department Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Extension Number: \_\_\_\_\_

Building: \_\_\_\_\_ Room Number: \_\_\_\_\_

Mail Stop: \_\_\_\_\_

Index Code: \_\_\_\_\_

## Service Requested:

Telephone Line/Equipment

Single Line

Multi-Line

Add or Change Voice Mail

Fax/Modem Line

Directory Listing

Campus on-line Directory

Pocatello Dex Directory Listing

Long Distance FAC

Long Distance Qwest Calling Card

800 Service

Network Port

Cellular Phone: New  Change  Number if already existing: \_\_\_\_\_

Do you want to Port an existing Cellular Phone Number? Yes  No

Phone type requested (Brand/Model) \_\_\_\_\_

Minutes per month requested \_\_\_\_\_ Text Messages per month requested \_\_\_\_\_

Data required? Yes  No  GB per month requested \_\_\_\_\_

Business Justification for cellular phone request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Contact Person/Prepared By

\_\_\_\_\_  
Requesting Department

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Account Director Approval

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
UBO Approval

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date