

Authorization Form

I, _____, hereby authorize _____ to
act as a representative on my behalf to submit an application for
(Only one item can be selected per Form)

- Setting up faculty or staff email account
- Change of password for email account
- Setting up and resumption of use of unit email account
- Preservation of email account for student on leave
- Student dormitory network account
- Faculty, staff or student campus WLAN account
- Total amount and details of paid calls via campus phones
- Borrowing of campus software optical disc
- Others _____

Hereby submitted to

Computer & Communication Center

Signature of Person Authorizing: _____

Signature of Authorized Person: _____

Personal ID number of Person Authorizing: _____

ROC year _____, _____ month _____ date