

DATE: _____

AS/400 Authorization Request

Check One:		UCS Use Only
Request for ACCESS to AS/400:	_____	_____
Request to REMOVE access	_____	_____
Request to UPDATE access	_____	_____

Individual's Name: _____
(Last) (First) (MI)

SSN: _____ Phone: _____

MVS Profile (If Known) ** Used for Remote Printing **

IMS ID: _____
 UTCC Project Code: J
 UTCC Programmer Number: P
 Report Destination: _____

Do you need print capabilities but do not have an MVS profile? _____

UCS Use Only

Application Areas Requested

UCS Use Only

Requesting Office: _____

Department Head Signature: _____ Phone: _____

Responsible Account No.: _____

<p>Return to: University-Wide Computing Services ATTN: AS/400 Security Officer 102 Andy Holt Tower Knoxville, Tennessee 37996-0112</p>
