



# CHG-BSL REQUEST FORM

## General Information

Request Date\* (month/day/year) :

Requestor Name\* (first and last, at least) :

Requestee Name\* (first and last, at least) :

Requestee Designation\* (check all that apply) :

- |                                  |  |
|----------------------------------|--|
| <input type="checkbox"/> Faculty | <input type="checkbox"/> Graduate Student      |
| <input type="checkbox"/> Staff   | <input type="checkbox"/> Undergraduate Student |
| <input type="checkbox"/> Visitor | <input type="checkbox"/> Other :               |

Start Date\* (month/day/year) :

Requestee Clemson Email\* :

\* required

## Secretariat Account

☐ Create an account on Secretariat

Assign to the following group(s).

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> alexandrov | <input type="checkbox"/> mackanholt |
| <input type="checkbox"/> duren      | <input type="checkbox"/> morgante   |
| <input type="checkbox"/> lackey     | <input type="checkbox"/> Other :    |

## Desk Hardware / Software

Room #:

- |                                   |  |  |
|-----------------------------------|--|--|
| <input type="checkbox"/> Monitor  | <input type="checkbox"/> Specific, additional cables : | <input type="checkbox"/> Software (requires admin access to install) : |
| <input type="checkbox"/> Tower    |  |  |
| <input type="checkbox"/> Keyboard | <input type="checkbox"/> Other :                       |  |
| <input type="checkbox"/> Mouse    |  |  |

## Additional Comments