



Southern
Illinois University
Carbondale

Southern Illinois University Carbondale
Information Technology
Computer Support Center

OFFSITE NETWORK ID PASSWORD CHANGE

This section must be completed by the student, faculty or staff member requesting a network ID password change. The requester must be located more than 35 miles from Carbondale, IL. Please print legibly. All fields are required. Your new temporary password will be faxed or mailed to you within one business day of receipt.

Name _____	Send password via:
Dawg Tag # _____	Fax # _____
Network ID _____	<or>
Non-SIU Email _____	Physical Mail _____
Day Phone # _____	_____
Signature _____	Date _____

(Please sign and date form in the presence of a Notary Public. Remember to bring the ID described below.)

This section **must** be completed by a Notary Public. (A Notary Public may be found in the telephone directory.)

Please select one type of current photo ID used to verify requester's identity:

- | | |
|--|--|
| <input type="checkbox"/> Southern Illinois University ID | <input type="checkbox"/> Passport |
| <input type="checkbox"/> Driver's License | <input type="checkbox"/> State Issued ID |

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and upon his{her} oath acknowledged to me that he{she} executed the same for the purposes therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS _____ DAY OF _____, 20_____.

STATE OF (or foreign country) _____ COUNTY OF _____

Please return this form to:
Information Technology
Computer Support Center
NW Annex A, Rm 115A, Mail Code 6633
Southern Illinois University Carbondale
850 Lincoln Drive
Carbondale, IL 62901

Phone (618) 453-5155
Fax (618) 453-4152