Print Form



UAF Facilities Services

Network Access Request Form (NARF)

For New Hire and Job Transfer Requests

Employee Full Name:			
-			
First (please write legibly)	Middle initial	Last	
UA ID (30xxxxxx):		Account Type:	
IIA Heornamo:		New Employee Student	
Start Date:			
		Full-time	
Shop / Unit:		Part-Time	
Primary Work Cell#:			
Primary Work Phone#: Primary Workstation# (fs-xxxx):		Permanent	
		Temporary until:	
Alternate contact email or phon			
AIM - give employee same access		(name of current or past employee)	
Special Instructions:			
Instructions:	information is correct & he	ereby authorize access for the employ	ee:
Instructions:	information is correct & he	reby authorize access for the employ	ee:
Instructions: I have verified that the preceding			ee:
I have verified that the preceding Supervisor Name:		Date:	ee: