

## Service Request

Send to:  
 Data Control  
 Information Technology Services  
 Hayes Hall 301

Please complete this form to request processing on the mainframe. Your request will be scheduled in relation to resource and time availability. You must schedule service at least one day prior to the date required.

Job Number: \_\_\_\_\_ Today's Date: \_\_\_\_\_ Desired Run Date: \_\_\_\_\_

Name of Job: \_\_\_\_\_

Requested by: \_\_\_\_\_ Department: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Number of copies needed: \_\_\_\_\_

Diskette(s) sent?      Yes      No  
 File(s) put in server folder:?      Yes      No  
 Attached Control Sheet?      Yes      No

*Note: Completed Control Sheet must be submitted if job requires one.*

Until further notice, run this job every: (select all that apply)

Monday      Tuesday      Wednesday      Thursday      Friday

If request is for gum labels, please include DCC or Grant/Project ID number.

Department: \_\_\_\_\_ DCC or Grant/Project ID#: \_\_\_\_\_

Policy for the printing of labels or other information  
 for personal use:

Special Instructions:

No program shall be run or data released to non-University organizations or University personnel without the written authorization of the department responsible for the data. Under no circumstances will data be provided to promote political purposes or personal gain of any individual or group.