

TELEPHONE WORK REQUEST

PLEASE COMPLETE AND FAX TO: 8302 5012 OR SCAN AND EMAIL TO: ithelpdesk@unisa.edu.au

THE IT HELPDESK: Tel: 8302 5000

Date of Application: ____/____/20____

Please refer to this web page for information on how to complete this form correctly
http://www.unisa.edu.au/ists/ITHelpDesk/FAQS/telephone/General/FAQ/general_faq10.asp.

If this form is not completed correctly, there will be delays in processing this form.

WORK REQUEST INFORMATION

Name of Person Requesting Work*: _____

Contact Number*: _____ Campus*: _____ Mobile Number*: _____

Div/Portfolio*: _____ School/Unit*: _____

Cost Centre Code*: _____

Please Note: The Cost Centre Code provided here will be charged for initial installation(s) and for on-going phone call costs unless an alternate cost centre is provided in Section 1 of this form.

I verify that all the information included is correct and can be input into the University's Information System.

Cost Centre Manager's Printed Name

Cost Centre Manager's Signature

SECTION ONE: New Phone Installation (* denotes required fields) Required Date¹: _____ (costs may apply.)

New Phone Contact Name: _____ Display name on digital phone

Wall Point Number*: _____ Additional Wall Point required

Div/Portfolio*: _____ Building/Room*: _____

School/Unit*: _____ Campus*: _____

Type of Connection Required*: Analogue(standard) or Digital (multi-featured)

Handset Required*: (fee applies) Voicemail Required*: (\$100 connection fee applies)

Phone Calls Access*: Internal Only Local STD IDD (Please mark all that apply)

Cost Centre Code: _____

(pays for on-going phone call costs for the new extension. Only necessary if Cost Centre Code is different from one supplied in "Work Request Information")

SECTION TWO: Move Extensions to a new location Required Date¹: _____ (costs may apply.)

Please provide details on all extensions below: Campus*: _____

(If you require more space, please add a separate page and tick this box Additional page of extension Relocations attached)

1.Extension*: _____ Phone Contact Name: _____ Display name

Existing Wall Point #*: _____ New Wall Point #*: _____

Existing Building / Room*: _____ New Building / Room*: _____

2.Extension*: _____ Phone Contact Name: _____ Display name

Existing Wall Point #*: _____ New Wall Point #*: _____

Existing Building / Room*: _____ New Building / Room*: _____

3.Extension*: _____ Phone Contact Name: _____ Display name

Existing Wall Point #*: _____ New Wall Point #*: _____

Existing Building / Room*: _____ New Building / Room*: _____

4.Extension*: _____ Phone Contact Name: _____ Display name

Existing Wall Point #*: _____ New Wall Point #*: _____

Existing Building / Room*: _____ New Building / Room*: _____

[1] For information on when our telephone technicians are on site please visit:
http://www.unisa.edu.au/ists/ITHelpDesk/FAQS/telephone/General/FAQ/general_faq05.asp

Additional Information, diagrams or further changes (if required):