STOCKTON INFORMATION UNIVERSITY TECHNOLOGY

UNIVERSITY AFFILIATE ENTITLEMENT REQUEST FORM

STOCKTON UNIVERSITY 101 VERA KING FARRIS DRIVE GALLOWAY, NJ 08205-9441

SECTION 1	Perso	onal Identi	fication ar	nd Info	rmatio	n											
Last Name To be completed by the									Prefix Suffix								
University Affiliate Applicant	First Name						MI			S.S.N.	(last 4 on	(y)					П
Street Address						Apt./Unit #	City								_		
State/Province	County	Country (if not United States)															
Primary Phone Number	Personal Email Ad	Personal Email Address									\exists						
If Applicant will be parking a vehicle in States of the lots/garages, please complete the following		Make Primary Vehicle Mo					lodel Primary Vehicle Lic. Plate #										
Biographical Informa		ng section, refer to the information as reference for Question 1. Ethnicity: AA = CA					= Black/African American, AI = American Indian/Alaskan Native, AS = As = Caucasian/White, HW = Native Hawaiian or Other Pacific Islander							ian,			
Gender M F		Birthdate	1. Ethnicity				1a. (if Caucasian) Hispanic/Latino Not Hispanic/Lat						c/Lati	no			
Emergency Contact In	nformatio		e following section			Phone Type: Per	manei	nt/Home,	Busines	s/Work,	Persona	Cell,	Parent/Ga	urdian			
Relationship to Applicant			·			Relationship Sib to Applicant: In-											ssv
Emergency Contact Last Name					Emergen	cy Contact First Na		- <u>y</u> ,			-7-5 1		,	MI			
Emergency Contact Permanent Street Ac	ddress					Apt./Unit #	City										
State/Province			County		ZIP/Postal Code				Country (if not United States)						\neg		
Emergency Contact Phone Number			Emergency Cor	ntact Phone	Туре		Em	ergency (Contact	Email A	Address (d	ption	al)				\neg
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Have you ever been a	student	or employ	ee of Stoc			If you have ever please fill out thi		peen issued a Z or STK number, username or PIN, or vendor ID, s section.									نــ
2. Z-Number Z				2a. Userr or ST													
2b. What was your previous role?	Student	Prospespe	ctive Student (ap	oplicant)		Faculty		Sta	ff			Food	Services				ļ
	Press	Presenter/	Performer			Vendor		Cor	ntracto	r 		Volun	nteer				
										_							_
Applicant Signature								Da	ate								Ш
SECTION 2	Managemen		sor Information	l			Διι	Authorizer Stockton Phone Number									=
To be completed by Stockton		ockton Email Ad	4				Authorizer Title										
Management Entity/Sponsor	Authorizer St	OCKION EMAN AU	uress				Addistract flue										
																	\neg
Authorizer Signature								D:	ate								
Authorizer Signature																	
SECTION 2a		ollowing section, here as reference	refer to the infor 2.	mation		Management Enti artment or organi											
		ation and Fir															7
	Accounts Pa Procurement	g Bursar's Office			Procurements & Contracts												
ΔDF	Facilities a Departmen	Department of Facilities Planning & Construction															
ADI	Campus Po										-						
		od Services ailroom			Tran	sportatio	n			Ve	ending						
PLGR		rsonnel, Labor & Government Relations (PLGR) Iuman Resources Office of Institutional Diversity and Equity							Pansions & Ranafits								
r Lun		vernment Relations]
					inues on t												

SECTION 2a (cont.)	For the following section, refer to the provided here as reference.	information			Section 2a that represents the division for the approval of University Affiliate			
	p			····				
	Academic Affairs (ACAD) Academic Advising	Office of Research	& Sponsored Programs	Rursar's Office	Student Records/Registr	rar		
	Honors Program	Institute for Faculty		Office of Global Engagement				
	School of Arts and Humanities							
	School of Arts and Humanities	(ARTO)						
	School of Business (BSNS)							
	School of Business							
	School of Education (EDUC)							
	School of Education							
	School of General Studies (GEN	S)						
	School of General Studies							
	School of Graduate and Contin		RAD)					
	School of Graduate and Continuing Stu							
4 O 4 D	School of Health Sciences (HLS School of Health Sciences	C)		Clinical Encility				
ACAD	Holocaust Research Center (HR			Clinical Facility				
710715	Holocaust Research Center)						
	Richard E. Bjork Library (LIB)							
	Richard E. Bjork Library							
	School of Natural and Mathem	atical Sciences (NAMS)					
	School of Natural and Mathematical Sc	iences	·	Nacote				
	Performing Arts Center (PAC)							
	Performing Arts Center							
	Satellite Campus (SAT)							
	Hammonton Campus	C-: (CODI	`	Manahawkin Campus				
	School of Social and Behavioral		-)					
	School of Social and Behavioral Science Southern Regional Institue and		hnology Training	Contar (SDI)				
	Southern Regional Institute and Educati			Certier (SINI)				
	Journal Medicine Mississe and Educati	ona. recimology nan	ing conci					
	President's Office (OPR)							
	Institutional Diversity and Equity	Institutional Resear	ch and Planning	Fiscal Affairs				
	Information Technology Service	es (ITS)						
	Information Technology Services							
	Board of Trustees (BOT)	Frankrika Basal						
UPK	Board of Trustees	Foundation Board						
01 11	University Relations & Marketin University Relations & Marketing	Print Services		Graphics Production				
	Hughes Center (HUGHES)	Time Services		Graphics Froduction				
	Hughes Center							
	Atlantic City Operations (ACO)	Atlantic City Camp	JS					
	Carnegie Center	Dante Dance Hall 1	heater	Noyes Art Garage	Champions of Youth			
	Alumni & Development (DEVL)							
	Alumni Relations	Foundation Board				j		
	Student Affairs (STUD)					1		
	Career Center	Vice President for S	Student Affairs	Dean of Students Office	Enrollment Managemen	nt i		
	Educational Opportunity Fund	CARE						
	Athletics (ATHLETE)							
	Office of Athletics and Recreation							
STUD	Campus Center Operations (CC)						
3100	Event Services and Campus Center Ope	erations		Student Development				
	Residential Life (RESLIFE)							
	Residential Life Counseling, Community Wellne	occ and Commu	nity Hoalth Educat	tion (\M/ELL)				
	Counseling, Community Wellness, and		,	Learning Access				
	SCAN ANI	D RETURN TO	informati	on.security@stoc	kton.edu			
SECTION 2b	A work order must be placed with					ests.		
SECTION ED	ID Card Required Yes	No Lock Ad	cess Required	Yes No	Email @stockton @go.st	tockton		
IT Entitlements Network	Acader	nic	Remote	<u> </u>	NB Banner			
	Academic Fac/Staff	BlackBoard	G Suite	VDI VPN		Account		

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SECTION 3	Z-Numbe			OFF	ICE OF	INFO	RMA	TION	N SECURIT	Y USE O	NLY		
To be completed by the University Office of Information Security		1 (MGMT)							Attibute 2 (ATY	P)			
Attibute 3 (ITAC)										Expiration			