

HUMEC Network Account Application Form

Print this form and return when completed to Network Support in Justin 122A

K-State EID: _____

Last Name: _____

First Name: _____

Department: _____

Telephone: _____

Location: _____

Account Type: Faculty Staff Graduate Student Undergraduate Staff

E-mail Forwarding: No Yes, to: _____

Expiration date (if known): _____

Comments: _____

Listserv Subscription:
(You will automatically be
subscribed to your department's
listserv.)

ATIDADM	FACULTY	HNFAC
ATIDFAC	FOODS	HNGRAD
ATIDGRAD	FSHSADM	HNGRDFAC
CLASS	GALICHIA	HRIMDFAC
CSDGRADS	HEGRDFAC	HRIMDGRAD
CSDUNDER	HNEXT	SACGRAD
EDWSTAFF	HNF&S	SENSORY

Approved By: _____