

UNIVERSITY OF MINNESOTA

Computer Science and Engineering Account Request Form

Purpose:

This form is for authorizing the use of various Computer Science and Engineering (CS&E) computing resources, including the Grad Machines. All information on this form is private. It will be used for identification and determination of eligibility for a CS&E account. Providing this information is voluntary; however, without the information, determination of you eligibility will not be possible, and creation of your account may be delayed indefinitely.

Be sure to read and sign the reverse side of this form!

In order to obtain access to the Grad Machines, you must have approval from a faculty member or another authorized approver.

Personal Information			
(1) Last Name	(2) First Name	(3) MI	(11) Account Type (check one)
Must Print Clearly or account will not be opened.			<input type="checkbox"/> CS Grad. <input type="checkbox"/> CS Under Grad. <input type="checkbox"/> CS Post-Doc <input type="checkbox"/> CS Visiting Faculty <input type="checkbox"/> CS Associate Faculty <input type="checkbox"/> CS Faculty <input type="checkbox"/> Office <input type="checkbox"/> Other _____ (Please explain)
(4) Address			
(5) City	(6) State	(7) ZIP	
(8) Work Phone		(9) Home Phone	
(10) Additional Comments			
(13) Additional Groups			(12) UMN Internet ID

Once completed, please return this account form and any necessary accompanying documentation to the CS&E Main Office, Keller Hall, Room 4-192. Accounts may take up to a week to be created, although they are usually created in less time. Once the account is made, your username and password will be available in the CS&E Main Office. Be sure to bring picture ID with you when you come to pick it up.

Authorization Signature:

Approver's name: _____ Approver's signature: _____ Date: _____

Rights and Responsibilities of the Users of CS&E Department Computer Systems

Use of University-owned or operated computing equipment carries with it responsibilities established by the Minnesota Computer Crime Action (Sections 609.87, 609.88, and 609.89), the University of Minnesota Office of Student Affairs ("Administrative Statement on Responsibilities Computer Use," April 1984), the Student Conduct Code (Section 4), your major department, the Institute of Technology, and the acceptable use policies instituted by the University and the department.

- Physical protection of our computer systems is everyone's responsibility. If you are the last person to leave a computing lab, please make sure it's locked.
- Respect the privacy of others.
- Take measures to protect your account and your data from unauthorized access.
- Don't share your account. Account sharing is against UofM Acceptable Use Policies.
- If you find a problem, report it to the system administrators.
(Office: Keller Hall 1-201; Phone: (612) 625-0876; E-mail: operator@cs.umn.edu)
- If you suspect that your account has been used by someone else, contact the system administrators immediately!
- Abide by all applicable laws concerning use of the system.
- Take responsibility for what you do.
- Have Fun!

Account privileges for CS&E department systems may continue after you graduate, end your employment or research, or are no longer registered for classes, however, accounts that are inactive for more than one year will be deleted.

Do not access or attempt to access systems or data for which you have not been authorized to access. This includes plagiarizing (stealing) your colleagues' work. Academic violations are handled expeditiously by the faculty on the Computer Science Academic Standards Committee. Violators will be subject to prosecution under the Minnesota Computer Crime Statutes. As with any criminal matter, such prosecution is handled by officials of the criminal system and, once initiated, is not within the direct control of the University.

I, the undersigned, have read and agree to abide by the policies stated above concerning my use of Computer Science computing resources. I also certify that the information provided on the front of this form is complete and accurate to the best of my knowledge.

Name: _____ Signature: _____
Date: __ / __ / _____