



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Information Systems & Computing (IS&C)

Information Resource Management (IRM)
1700 Pratt Drive (0214), Blacksburg, VA 24061
Fax 540/231-8649

January 7, 2005

Information Resource Management (IRM) requires signature authorization from the Dean, Director, or Department Head in order to process all access requests. In addition, the Dean, Director, or Department Head may delegate that authorization as he/she chooses. In order to keep an up-to-date record for each department, IRM has implemented a new signature database that will enable us to make changes in signature authorization without requiring all new signatures each time a change is made. IRM will require first time signatures in order to get the data entered correctly.

Please fill out the information below specifying all authorized personnel for each area. Please have each authorized individual sign the signature card and return this letter and all signature cards to IRM at the above address. Please contact IRM at http://4help.vt.edu if you have any questions and/or comments.

Department Name \_\_\_\_\_ Department Number \_\_\_\_\_

Dean, Director, or Department Head (please print name and sign)

Dean, Director, or Department Head ID number \_\_\_\_\_

Alternate Dean, Director, or Department Head (please print name and sign)

Alternate Dean, Director, or Department Head ID number \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

(Please print name and PID)

Authorized Employees: (Please include full name, ID number and circle the appropriate access)

Name/ID# (please print)
Hokies/Citrix UNIX VTAIX Oracle/Banner Hokies/Central Services OU Administrator

Name/ID# (please print)
Hokies/Citrix UNIX VTAIX Oracle/Banner Hokies/Central Services OU Administrator

Name/ID#(please print)
Hokies/Citrix UNIX VTAIX Oracle/Banner Hokies/Central Services OU Administrator

Name/ID#(please print)
Hokies/Citrix UNIX VTAIX Oracle/Banner Hokies/Central Services OU Administrator

**SIGNATURE CARD**  
(NOTE: *Please use black ink*)

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**Name (please print)**

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**Signature**

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**ID Number**

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**SIGNATURE CARD**

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**Name (please print)**

---

**Signature**

---

**ID Number**

---

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**SIGNATURE CARD**

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**Name (please print)**

---

**Signature**

---

**ID Number**

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**SIGNATURE CARD**

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**Name (please print)**

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**Signature**

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**ID Number**

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**Please duplicate these signature cards as necessary and return the completed forms to IRM for processing.**

**Thank you for your assistance.**