

**MURRAY STATE UNIVERSITY
TELECOMMUNICATIONS SERVICE REQUEST**

All requests for additions to, or changes in, current telecommunications services, or for new services, must be made on this form. If you have a problem with existing Telecommunications service, please call 4400 to report.

Requests for additions or changes must be received by the Information Systems Office a **minimum of 2 weeks** prior to the date the service is required.

Date of Request: _____ Date Needed: _____
Dept. Name: _____ Budget No.: _____
Person Requesting: _____ Telephone No.: _____
Approval: _____
Signature

If this is a Cisco VOIP phone request, please fill in information for lines 1 through 7 below. **ALL INFORMATION IS NEEDED FOR VOIP PHONE PROCESSING.**

If this is a request for analog service (ex. fax line, traditional phone, residential college service) use the comment box below to describe request.

1. Name and email address of the individual who will appear on the phone. If the phone user will be a student, please use a position title.

2. Are we changing an existing phone with a current directory number, or do you need a new 2-line or 6-line VOIP phone?

3. Building and room number the phone will be in.

4. Will this directory number need a voice mail account?

5. Does this directory number need Local or Long distance service?

6. Does this phone need to monitor other directory numbers? If so, please list each additional directory number in the order they should appear on the phone.
2) _____ 3) _____ 4) _____ 5) _____ 6) _____
7. Do any directory numbers on this phone need call waiting?

Comments: _____

DO NOT WRITE BELOW THIS LINE

Date Received: _____ Call Group Assigned: _____
Request No.: _____ Cable Pair Assigned: _____
Date Due: _____ Phone No. Assigned: _____
Budget No. Charged: _____ Materials Charge: _____
Work Completed _____ Total Charge: _____
Equipment/Materials Used _____

FAX this form to Telecommunications department x2101. All requests will be processed in the order they are received.