

Use this form to request an extension of access to the Adelaide University computer network and IT services.

To complete your request, you will need authorisation from your lecturer, tutor, course coordinator or program director.

Lodgement details are provided at the end of this form.

### Section 1: Personal Details

Student ID:

Mr/Miss/Ms/Mrs: First name(s):

Family name:

Contact Email Address:

### Section 2: Extension/s Requested

Please note that access to library databases and online journals or Office 365 cannot be extended. Due to licencing requirements a student must be enrolled in a current course to have access to these resources.

Email

Note: email access can only be provided to students who are active in their program or officially on leave

Computer pools

Start Date

End Date

Library facilities

Start Date

End Date

On campus Internet

Start Date

End Date

Printers

Start Date

End Date

myAdelaide Student Portal

Start Date

End Date

### Section 3: Details of Request

A request to extension of Network and IT Services is only granted under exceptional circumstances. The University is governed by strict licensing requirements and cannot enable access for non-academic purposes. Please provide precise details of the reason for this request and include justification for End Date/s in Section 2, e.g. completing assessable course requirements beyond the standard enrolment period.

Note. A Request for extension to a Service, such as access to the Computer Pools, will not be granted for reasons such as personal use or to consume student-funded Quota balances.

### Student Declaration

I understand and agree that access is granted on the condition I honour the University's contractual obligations about the use of and copyright of computer software. I agree to observe the Acceptable Use of Information Technology (IT) facilities Policy.

Student's Signature:

Date:

### Lecturer/Tutor/Course Coordinator/Program Director Declaration

I certify the applicant is a student of Adelaide University, and that the student extension requested is for academic purposes directly related to the course of study, as reflected in Section 3, where I am the lecturer/tutor for this student. I am authorised for the provision of this extended access to be charged to this Academic Unit.

Staff members name:

Position:

Academic Unit:

Phone Extension:

Staff members signature:

Date:

### LODGING YOUR APPLICATION

**Please lodge your application by email to: [StudentAssist@study.adelaideuni.edu.au](mailto:StudentAssist@study.adelaideuni.edu.au)**

**Please lodge your application to Student Assist at a campus below:**

<b>Adelaide City Campus - East</b> Student Assist Level 3 – Playford Building Level 3 – Hub Central	<b>Adelaide City Campus – West</b> Student Assist Level 2 Jeffrey Smart Building	<b>Magill Campus</b> Student Assist Level 1 B Building
<b>Mawson Lakes Campus</b> Student Assist Ground Floor C Building	<b>Mount Gambier Campus</b> Learning Centre Wireless Road Mount Gambier SA 5290	<b>Whyalla Campus</b> Student Assist Ground Floor Main Building 111 Nicolson Avenue Whyalla Norrie SA 5608

### OFFICE USE ONLY

#### Student Assist

Date received:	Received by:
I acknowledge that this request is an extension to the standard Student Lifecycle SIAP Business Rules having confirmed the student's record as currently being in a status that does not constitute the access requested above	
Date processed:	Processed by: