Alumni Computer Account Application
Computing and Telecommunications Services

This form is intended for graduates of Wright State University to request an Alumni Computer Account. Once processed, the Alumni Account is authorized for a period of five years. Account holders are required to have their own internet service provider to be able to access this account.

A few items to be clarified:

What is meant by "Previous Last Names"?
This is in case your name has changed since you graduated. The information we will retrieve when we process your request will have your last name as of your graduation. If you wish to use your new last name, please update that information via the Wright State Registrar's Office before submitting this request. Contact them at 937-775-5588 or by email at registrar@wright.edu.

What if I don't want to put my Social Security Number on the application?
You can either leave that part blank or write in your University ID number. If you leave the field blank, the Accounts Manager will call you to get that information and finish the application. Please be certain to include a phone number where you can be reached. This will delay the processing of your application.

What am I supposed to write in the "comments" section?
This section is not required. It is there in case there is something you wish to bring to our attention.

Note:
Be sure to sign the bottom of the Alumni Account Application form and attach a copy of your driver's license.

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Please read and fill out this application completely. Incomplete applications will not be processed. If you have questions about filling out your application, please ask a Help Desk representative. **Please return or fax completed application with a copy of your driver's license (required) to the CaTS Help Desk:**

CaTS Help Desk
025 Library Annex
Wright State University
Dayton, OH 45435-0001

Phone: 937.775.4827, 1.888.775.4827
Fax: 937.775.3331
Email: helpdesk@wright.edu

Applicant Information: *Required Fields

Last Name*

First Name*

MI*

Previous Last Names

University ID

Phone* (with area code; where you can be reached or a message can be left)

Fax Number*

Address 1: _____

Address 2: _____

City: _____ **State:** _____ **Zip Code:** _____ **Country:** _____

Mailing Address*

Comments: _____
_____

Legal Responsibilities:

The purpose of this statement is to inform you of your legal responsibilities and requirement as a user of Wright State University computer systems.

Your account is to be used only for authorized use. All users must be registered with Computing and Telecommunications Services. Frivolous applications, commercial use, and unauthorized use or misuse (game playing, unauthorized use of files, any form of personal harassment, etc.) are prohibited and could result in the loss of your account and charges being brought against you through an appropriate University office. Your account(s) is (are) for your use only; sharing of accounts and passwords is strictly prohibited. For acceptable use guidelines for campus computing, see:
http://www.wright.edu/wrightway/3002.html

Alumni accounts will be issued for five years, renewable upon request.

Password resets will be done only in person, with a government issued identification card (example: driver's license). If this is not possible, please contact the CaTS Help Desk.

I have read, understand, and accept the above responsibilities as an account holder, and I agree to comply with these and all WSU Computing and Telecommunications Services policies and conditions.

Applicant's Signature: _____   **Date:** _____