admin

THE SOUTH CAROLINA
DEPARTMENT *of* ADMINISTRATION

Instructions: This form should be used to request, transfer, or update:

- A nonprivileged, network (SCNETID) account
- A service desk account
- A Mainframe account
- A Linux/UNIX account
- A Managed Workstation

Submit completed and signed form to the South Carolina Department of Administration (Admin) Service Desk at servicedesk@admin.sc.gov. Information must be provided for required fields (as indicated by *). Incomplete or unclear forms and data will cause delay in completing your request. Request must be submitted **at least five (5) business days prior to Need by Date**.

For emergency or sensitive requests, or if you have questions, contact the Service Desk at (803) 896-0001 **prior** to submitting your request.

For All Accounts (for specific managed workstation requirements see next page)

Agency / Requestor Information			
Agency *	Division *	Date of Request *	Need by Date *
Requestor Name *	Requestor Phone *	Requestor Email *	

Account Type / Number	
Account Type: * ☐ Network (SCNETID) ☐ Service Desk ☐ Mainframe ☐ Linux / UNIX ☐ Email Only	Account Number *

Employment Type	
Employment Type (provide a termination date for all types except Permanent): ☐ Permanent ☐ Time-Limited ☐ Temporary ☐ Intern ☐ Temp Grant ☐ Contractor ☐ Affiliate	Termination Date:

User Information			
Last Name:	First Name:	MI:	Username:
Manager / Supervisor Name:	Manager / Supervisor Email:		

Deployment and Directory Information		
Job Title / Description:	Department:	
Office Location / Address:	City, State, Zip:	Room / Office #:
Office Phone:	Office Fax:	Mobile:

Email / Mailbox		
Create Mailbox: ☐ Yes or ☐ No	If Yes: Choose an item.	Preferred Email Address:

See Next Page for Managed Workstation Information

Account / Workstation Activation Request
IT-3000A
(Rev. 10/2022)

admin
THE SOUTH CAROLINA
DEPARTMENT *of* ADMINISTRATION

For Managed Workstation

Workstation Type

Type:

☐ Desktop ☐ Laptop ☐ Tablet ☐ VDI ☐ Other

Number of Monitors:

Enter # of Monitors:

Software Installation

All workstations will be imaged using a base image prior to deployment or reassignment. The base image includes windows operating system, productivity tools, anti-virus, disk encryption, internet browser, patch management, and security response utilities. Installation of customer managed applications may be requested (request must be submitted **at least five (5) days prior to Need by Date**). Such requests may cause delay in deployment. **Technicians will assist with the installation of customer owned applications. However, the customer is solely responsible for coordinating and managing application configuration and support with third-party application providers, as necessary**. All software requirements must be included with the submission for request.

A functioning and supported workstation is made available to the endpoint support team.

Identify any special application requests below:

☐ Adobe Acrobat DC Pro *		
☐ Microsoft Visio *		
☐ Microsoft Project *		

* Agency is responsible for purchasing, inventorying, and maintaining software keys for agency licensed software.

Inventory Contact and Asset Information

Inventory Contact:	Phone:	Email:

Make (if available):	Model (if available):	Serial Number / Service Tag:	Machine Name (if available):

Additional Information or Instructions

Provide any additional or helpful information, including shared drive access data, network or printer access, email distribution lists, etc.

Requestor: _____ _____ _____
Signature *Print Name* *Date*

Agency IT Director / Liaison: _____ _____ _____
Signature *Print Name* *Date*