

Application for Issuance of a University Account for the Use of IT Services by Guests at Heilbronn University of Applied Sciences

Applicant:

(Title) Last Name, First Name:

Contact Mail Address:

Area of Activity (Faculty/Study Program/Department):

Date of Birth:

Lecturer: ☐

Student: ☐

Other Activity: ☐

Agreement on the Use of the University Account

I undertake to comply with the Regulations Governing the Use of Computer Usage at Heilbronn University of Applied Sciences, as amended from time to time. The current version is available on the Universities IT Center website at: <http://www.hs-heilbronn.de/rz/ordnungen>.

Date:

Signature:

Approval by the Responsible Person (*)

I hereby confirm that the applicant is engaged as a guest within my area of responsibility.

Name (in block capitals):

Signature:

Date:

(*): Dean, Study Program Director, Department Manager, Chancellor, Head of IT Services

The access credentials will be sent to the applicant's email address specified in this application.