Application for Geisel Departmental/Org Account

Account Name Requested:	
Account Requestor:	
Email Address of Account Owner:	(Owner can be the requestor or the person who will manage the account.)
Rationale for Account:	
Account Phone #:	Account Hinman Box:
Name of Department:	
Account Status:	w Renewal (If renewal, NetID:)
for sponsored research, the acc Department Head signature se	end of the period requested or a maximum of 12 months. If the account is count may be set up for the length of the award; see note in Major Unit ection below for authorization information. This account is requested for a period of months.
	Responsible Party determines that the account is still necessary, he/she withis account for an additional period of time, up to 12 months.
Department Head (print): _	
Department Head (signature	e)
Date:	
Dean's Office Approver (prir	nt):
Dean's Office Approver (sigi	nature):
Date:	
Please return the completed	d form to:

Geisel HR Hinman Box 7060 or email: geisel.human.resources@dartmouth.edu

Effective: September 2021