



# TEXAS TECH

Communication Services

Phone: (806) 742-2000 Fax: (806) 742-1343



## Request/Cancellation for Telephone Calling Card

### INFORMATION REQUIRED FROM REQUESTING DEPARTMENT

Date Requested: \_\_\_\_\_

Department Name: \_\_\_\_\_

User's Name: \_\_\_\_\_

Department Code: \_\_\_\_\_

Tech ID: \_\_\_\_\_

Department Phone: \_\_\_\_\_

User's Job Title: \_\_\_\_\_

Departmental Account Number: \_\_\_\_\_

Address/Mailstop: \_\_\_\_\_

### REQUESTED ACTION:

New Activation:  Card to be Mailed

Card will be picked up

Cancellation: Date of Cancellation: \_\_\_\_\_

Calling Card Number: \_\_\_\_\_

(Please mail Calling Card with Cancellation Form.)

I have read and agree to abide by Texas Tech University Health Sciences Center OP 55.01.

User's Signature: \_\_\_\_\_

### DEPARTMENT HEAD APPROVAL

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### COMMUNICATION SERVICES USE ONLY

Request Received By: \_\_\_\_\_

Card Pickup by: \_\_\_\_\_

Date Request Received: \_\_\_\_\_

Pickup Date: \_\_\_\_\_

911 File Entered by: \_\_\_\_\_

Calling Card #: \_\_\_\_\_

Telesoft Entered by: \_\_\_\_\_