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| Requesting Department | Service Request Coordinator | Phone # | **Work Order # (IT Use Only)** |
| Email Address | Centrex Account (xx-xxxxxx-xxxxx) | Mail Stop |
| Site Location (Address, City) | Building Number (if known) | New Location☐ YES ☐ NO |

**Service Requested**

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| **Voice**☐ Add New Line☐ Add New Extension☐ Move Existing Line☐ Disconnect Line☐ Add Voicemail☐ Remove Voicemail☐ Programming Change☐ Other | **Data/Internet**☐ Add New Internet☐ Increase Internet Speed☐ Disconnect Internet☐ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(If ordering high-speed data circuit with TTVN connectivity, please reference the Circuit WO form at <http://it.tamu.edu>) | **Cable TV**☐ Add New Cable TV☐ Change Existing Cable TV☐ Disconnect Existing Cable TV☐ Other | **Additional Services**☐ Estimate Needed☐ Order new VoIP  Phone System☐ Order Conference  Phone☐ Order Headset(Please note additional services may incur additional costs) |
| Existing Telephone/Service Number(s) (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Room Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Move to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Remarks: Onsite Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Date Work Order Prepared | Departmental Approval |
| Signature | Date |
| Service Date Desired |

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| **Texas A&M IT Use Only**Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New Phone/Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Equipment Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WebDoc Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Submitted Date: \_\_\_\_\_\_\_\_\_\_\_\_\_Additional Remarks:  |