Georgia Perimeter College HP/ORACLE ID
Request Form

Date __________________

Complete entire form to ensure creation of ID and return to Enterprise Information Systems/Decatur Campus in a sealed envelope:

First Name (please print clearly)

Last Name

Desired Oracle password (6 to 8 characters, first character must be alphabetic)

A temporary hp system password will be assigned to your ID which you must change when you sign on to the hp the first time.

Application: (check application(s) to be accessed)

Banner SIS ___ Purchasing ___ Testing ___
Banner FA ___ Dental Hygiene ___
HRS ___ Security ___ Other ____________________________

******** WARNING, PLEASE READ**********

GEORGIA COMPUTER SYSTEMS PROTECTION ACT (Article 6)
“to provide for criminal liability and penalties for crimes of computer theft, computer trespass, computer invasion of privacy, computer forgery, and computer password disclosure; to provide for civil remedies and damages;”
Chapter 9 of Title 16 of the Official Code of Georgia

SIGNATURE: ____________________________________________ DATE: ________________

SUPERVISOR SIGNATURE: _____________________________________ DATE: _______________

CAMPUS: ____ DEPARTMENT: _______________________________ DATE: _______________

OIT ENTRY ONLY

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<th>User Role(s)</th>
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