SSRL/LCLS Computer Account Request Form
August 2009

Fill in this form and sign the security statement mentioned at the bottom of this page to obtain an account.

Your Name: __________________________________________________________

Institution: ___________________________________________________________

Mailing Address: ______________________________________________________

Email Address: _______________________________________________________

Telephone: ___________________________________________________________

Name of supervisor or advisor, or other person with whom we can make contact should there be any question about the use of the account:
_______________________________________________________________________

Staff Members: Your Username will be your last name, modified by your first initial if that name is already in use.

Beam line Users: Your Username will be b_yourlastname, modified by your first initial if that name is already in use.

Initial password desired – must be changed after your first login:
_________________ (Minimum length 8 characters, your password should be a combination of 3 out of 4 options: 1- lowercase 2-uppercase 3-Numeric 4-Special Characters (e.g.: $), beamline alphas password requirement: Alpha+Numeric+$)

Beam line Computer(s) on which you need an account: ______________

Please choose which type of Operating System you will need an account on:

VMS(Staff & Beamline Users): Windows(Staff & Beamline Users):

_______________________________________________________________________

[You must read and sign the security statement at http://www2.slac.stanford.edu/comp/slacwide/account/declare.html before we can establish your account.]