

Sam Houston State University



Account Transfer Request Form

Contact: Information Resources Helpdesk
(936)294-1950 or helpdesk@shsu.edu

Transfer Account Ownership:

Organization's Username: _____

Organization's Name _____

To:

Sponsor's Username: _____

Sponsor's Name: _____

Department: _____

Campus Phone Number: _____

Effective Date: _____

Faculty/Staff Signature

Date

All Organizations must have a Sam Houston State University Faculty or Staff member as a sponsor.

Please return request by:

Email:

Fax: (936)294-1231

Campus Mail: Information Resources
Box 2449

For Information Resources Department Use Only:

Received by: _____ Date Received: _____