



Webspace Request Form

NOTE: Student Organizations must use the *Student Organization Webspace Request Form*.

Requestor:

Full Name: _____ NetID: _____

Telephone Number: _____

University Department: _____

Email Address: _____

Classification: **Faculty** **Staff** (Student may not be the Requestor)

Webspace Information:

Entity for which Webspace is requested:(eg. Department/Committee/Organization)

Estimated disk space required: _____ MB (eg. 30MB)

Desired URL (eg. http://name.org.msstate.edu/ or http://dept.msstate.edu/)

Purpose of Webspace: _____

Webmaster Information (person maintaining the webspace):

Full Name: _____ NetID: _____

Telephone Number: _____

University Department: _____

Email Address: _____

Classification: **Faculty** **Staff** **Student**

I agree to ensure that the contents of the archive do not violate any applicable laws or policies.

Requestor's Signature Date

Requestor's Name (please print)

For Help Desk Use Only **Ticket Number** _____