

Request to Reset a Password



People who are currently entitled to access one or more of the University's online services, and who are unable to visit the North Terrace, Waite or Roseworthy campuses, should complete this form if they need to have their password reset. Once completed, you will be notified of your reset password via your mailing address or fax number.

NOTE: The password that is reset will apply to most online services including - University email, Internet access, Access Adelaide, Myuni, Calendar, desktop login and Dial-in Service etc.

Your password is a confidential piece of information that identifies you to University online services. You are responsible for any activity initiated from your account. In gaining access to the University of Adelaide online services you agree to abide by the University's Information Technology policies and guidelines available online at: <http://www.adelaide.edu.au/policies/cat/54/>

You must complete all sections on this form and provide a photocopy of photo identification in the form of either a student/staff ID card, driver's licence, passport etc. If any sections are not completed, the request may be delayed and/or refused. Once completed, fax this form and the copy of your photo ID to;

- if you are a student - Student Centre on +61 8 8303 4401, or
- if you are not a student - Card Services on +61 8 83038096.

(People who fall into both categories above may fax the completed form to either number.)

I request that my password be reset and I understand that upon receipt of the password I will change it immediately to a password known only to myself.

Name:

ID Number: **Date of Birth:**

Mailing Address:

Program Enrolled (students only):

Faculty/Dept or Admin Area (staff only):

Fax Number: **Telephone Number:**

I authorise the University of Adelaide to reset and send notification of my password to (please select an option):

Mailing Address

Fax

I understand that the information on this form is confidential and will only be used for the purpose of verification of my identity.

Signature: **Date:**

Office Use Only:

Password Request Received:	Password Request Processed:	Staff Identification:
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