

CHICAGO STATE UNIVERSITY

Information Technology Division
Office of Web Support
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Web Account Request/Renewal Form

This form must be completed by the **department head** before an account can be issued or renewed for your department. We ask that you designate a **site editor** from your department to work with us. The site editor will be responsible for updating the web content.

Department Name _____ Department Location _____

Department Phone _____ Department Fax _____

Department Website www.csu.edu/_____

Department Head (Approver) Information

Name _____ Title _____

Phone _____ Email _____

Appointed Site Editor Information

Name _____ Title _____

Phone _____ Email _____

Is the appointed site editor replacing a previous site editor?

- No
 Yes, previous site editor's name _____

*The site editor can not be the same person as the department head.

As the department head, I take full responsibility for overseeing the integrity of the content, spelling and grammar of the entire website being taken care of by the appointed site editor. The department is responsible for updating the web content.

Department Head Signature _____ Date _____