



Telephone Order Request Form

Request a new telephone or POTS fax line.

To request a change to an existing phone, please submit a Telephone Change Request form.

Employee Name: _____ Bergen Username: _____ College ID# _____

Department: _____ Room #: _____

“i @ a i © \$ ¥ (required) ”

(Submit Network/Exchange form for new email address)

For a new telephone line (extension), specify the calling region below:

Internal Campus Local Area (201, 551, 973, 862, etc)

Tri-State Area (NY, NJ, CT) Nationwide

Request Voicemail? Yes No

For a POTS line for fax machines, specify the calling region below:

Local Tri-State Area (NY, NJ, CT) Nationwide

Additional Requests or Comments: _____

Requested By:

Requester Name
(Please Print)

Requester Email Address

Phone Ext.

Dept. Head/Dean
(Please Print)

Dept. Head/Dean
Signature

Date

President's Cabinet Member
(Please Print)

President's Cabinet Member
Signature

Date

Submit this form **with all signatures** to the Help Desk in **L154B** or scan & send to **helpdesk@bergen.edu**.