

BANNER PRINTER REQUEST FORM

The information on this form will be used for connecting a **networked printer** to the Banner System. If you are unsure of any of the information requested, please contact the Help Desk at 2828 for assistance.

Upon completion of this form please forward or FAX to:
Norma McDonald – 55 W. 13th St. Office 710
FAX 212 -647- 8211

Name: _____ Tel. Ext: _____ Date: ___/___/___

Dept: _____ Division: _____

Location of printer (Bldg., Floor, Room, Office): _____

Printer Manufacturer and Model: _____

Printer IP Address: _____

Novell Printer Name: _____

Supervisor's Name (print): _____

Supervisor's Signature: _____

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For ENTERPRISE APPLICATIONS Use Only
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Assigned LP Destination Name _____

Problems encountered: _____

Printer Tested and Confirmed Working by: _____

This printer has been added to the following Banner Instances: _____

System Administrator's signature: _____

Date completed: ___/___/___