

**Paterson Public School  
 Department of Technology  
 Request for Long Distance Access Code**

**Please complete and return this form to:  
 Department of Technology  
 Fax Number: 10901**

<b>Requestor Name:</b>		
<b>Title:</b>		
<b>School/ Department:</b>		
<b>E-mail:</b>		
<b>Tel/Ext No.:</b>		
<b>Last 6 digits of Social Security Number:</b>		
<b>Fax:</b>		
<b>Reason for long distance access code request:</b>		
<b>Reason for Access:</b>		
<b>User Signature:</b>		<b>Date :</b>
<b>Supervisors Approval Title and Signature:</b>		<b>Date :</b>
<b>For Operator Use only</b>		
Approved_____ Denied_____	Creation Date:	Expiration Date:
Action By Mr. Kenneth Sumter Supervisor, Department of Technology	Signature:	Date:
<b>Notes</b>		