

**RADFORD UNIVERSITY  
BUSINESS AUTHORIZATION CODE REQUEST FORM  
AND  
TERMS AND CONDITIONS**

**DEPARTMENT CONTACT:**

**TELECOMMUNICATIONS & BILL SERVICES**

Name \_\_\_\_\_

Telephone: 6600 or 5002

Telephone Number \_\_\_\_\_

Fax: 6120

P. O. Box Number \_\_\_\_\_

Email \_\_\_\_\_@radford.edu

\*Department Budget Code \_\_\_\_\_

\*Required

**Instructions:** Complete this form, obtain required signatures and return to Telecommunications & Bill Services. **New users must review and sign the terms and conditions on page 2.** If all necessary information is not provided, the form will be returned to the Department Contact. **NOTE:** This form is to be used for Authorization Code request only. Forms are available on the Telecommunications & Bill Services web page for other telecom services.

**ISSUE AUTHORIZATION CODE/S TO:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

**THE NEW USER MUST REVIEW AND SIGN THE TERMS AND CONDITIONS ON PAGE 2.**

**CANCEL AUTHORIZATION CODE/S ISSUED TO:**

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

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**SERVICE REQUESTED BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

**DEPARTMENT HEAD** \_\_\_\_\_ **DATE** \_\_\_\_\_

**DEAN/DIRECTOR** \_\_\_\_\_ **DATE** \_\_\_\_\_

Mail completed and signed forms to: **Telecommunications & Bill Services**

**Box 6887**

**OR**

Fax completed and signed forms to: **6120**

## Business Authorization Code Terms and Conditions

**Business Authorization Codes** are requested by the department head to permit designated faculty and staff to place long distance calls for official university business. Personal telephone calls **should not** be made using the Business Authorization Code.

**Safeguarding and confidentiality of the authorization code is the sole responsibility of the assignee.** Sharing the authorization code with others or using someone else's code is prohibited. If the authorization code is willingly shared with others, the assignee will be responsible for all charges incurred. The code should be kept in a secure location. The code should not be programmed into telephone "speed dialing", etc.

Departments can also **request an additional code for student workers. Students should not be allowed to use codes issued to university staff.** A business authorization code can be requested for students that are required to place business long distance calls. Multiple student workers (up to three) can use the same business code. Departments should discuss these terms and conditions and monitor the use of business codes assigned to students. (Please see web addresses and information below.)

**Lost or stolen authorization codes** should be immediately reported to Telecommunications & Bill Services by calling 6600 or 5002.

The department head or Telephone Services may cancel the authorization code at anytime if circumstances warrant researching suspicious activity on the account.

**Long Distance call records** are available on the Telecommunications & Bill Services web site at [www.radford.edu/~tel-serv](http://www.radford.edu/~tel-serv) by using the available link "**Control** - [Check your balance on the web. The "Calling Code" is your Authorization Code](#)" or at <https://telmast/phonebill/login.jsp> and entering your Calling Code (authorization code.) Your temporary password is "password."

**Before issuing a new business authorization code, the new user must review the terms and conditions, sign the section below and submit to Telephone Services.**

I, \_\_\_\_\_ (Please Print) agree to comply with the above terms and conditions. The business authorization code assigned to me will only be used for official university business and will not be used to place personal long distance calls. I will be responsible for the safeguarding and confidentiality of the business authorization code. I will not share this code with others.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

\_\_\_\_\_  
Telephone Number

**This form must accompany the TS3 form when requesting a new Business Authorization Code. The request will be processed upon receipt.**