

# STC Services Registration Form for Oberlin College Student and Employee Personal Codes

Oberlin College

Application for Long Distance Authorization Code

**Student**

**Admin. Personal**

RETURN THIS FORM TO TELEPHONE SERVICES

For your application to be processed, all information must be completed. All information should be typed or hand-printed in ink.

(Student) Student T # \_\_\_\_\_

(Admin. Personal) Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_  
last first middle

Campus Phone ( 440) \_\_\_\_\_ - \_\_\_\_\_

Campus Mailing Address:

Department Name \_\_\_\_\_

Room Number \_\_\_\_\_

Building Name \_\_\_\_\_

Home Mailing Address:

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Home Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Employee/Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

TELEPHONE OFFICE USE ONLY

ENVELOPE NO. \_\_\_\_\_