Oberlin College

Long Distance Authorization Code Application
Administrative College Business On-Campus

Please return form via campus mail to:
Telephone Office Service Building 211 or
Email: telcorep@oberlin.edu
All information must be complete.

Code Holder Information:

T Number:

Name (Last, First, Middle):

Campus Phone Number:

Department Name:

Building Name:

Room Number:

Administrative Information:

Division Name:

Department Name:

FOAP ACCOUNT (Required)

FUND # ☐☐☐☐☐ (5 DIGITS)

ORGN # ☐☐☐☐ (4 DIGITS)

ACCOUNT # 7 1 2 1 (4 DIGITS)

PROGRAM # ☐☐ (2 DIGITS)

Employee Signature: _____ Date _____

Department Head Signature: _____ Date _____

Division Head Signature: _____ Date _____

TELEPHONE OFFICE USE ONLY

ENVELOPE NO._____