DegreeWorks
Delete Request Form

<table>
<thead>
<tr>
<th>PLEASE PRINT</th>
<th>Employee UIN____________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name</td>
<td>First Name</td>
</tr>
<tr>
<td>Department</td>
<td>Phone</td>
</tr>
<tr>
<td>User ID</td>
<td></td>
</tr>
<tr>
<td>Applicant Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

Please CIRCLE the appropriate categories (one in each box):

- Full-time Employee
- Staff
- Temporary
- Part-time Employee
- Faculty
- Student Worker

Reason for Delete: ______________________________________________________
____________________________________________________________________

SIGNATURES

Person Requesting Deletion ___________________________ Date

Department Contact ___________________________ Department Name ___________________________ Date

For iTech Use Only:
Date Deleted:______________  Initials:______________