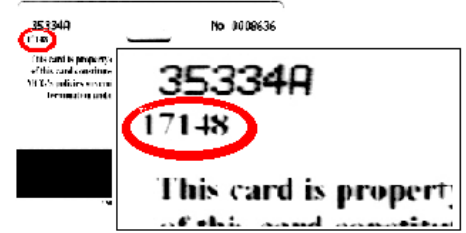


MCG ExpressCard - Departmental Copy Privilege Application (07/2002)

To activate an MCG ID for Departmental Copy Privilege, please complete the web application below, **using your computer** to enter the information. If you are unable to access the web form, please call 1-9939 for assistance.

Use the **TAB** key to advance through the form (using TAB removes the "**instruction messages**" before printing).

The badge number requested is the 5 digit number located on the back left of the card, just above the words "This card is property..." **It is 5 digits with NO letters.**
If this number is not printed on the ID, please contact the MCG ExpressCard office for assistance.



The completed MCG applications should look like this:

MCG EXPRESS COPY CARD APPLICATION - DEPARTMENTAL COPIES
Medical College of Georgia

DATE 01/02/2002 MCG MCG HI

USER NAME Ima McGemployee MCG BADGE # 12345

DEPARTMENT ADDRESS Bldg/Rm DEPARTMENT EXT. 1-1234

DEPARTMENT NAME Department Name

DEPARTMENT ACCT # FUND 5 digits - DEPT 8 digits - PROGRAM 5 digits - CLASS 5 digits - (PROJECT) (alpha-numeric)

DEPARTMENT CONTACT Callme Forinfo BLDG/RM Bldg/Rm EXT 1-3456

FUND APPROVAL NAME Callme Foraccount BLDG/RM Bldg/Rm EXT 1-5678

FUND APPROVAL SIGNATURE J. Signfor Themoney

The completed MCG-HI applications should look like this:

MCG EXPRESS COPY CARD APPLICATION - DEPARTMENTAL COPIES
Medical College of Georgia

DATE 01/02/2002 MCG MCG HI

USER NAME Imahealth Incmployee MCG BADGE # 12345

DEPARTMENT ADDRESS Bldg/Rm DEPARTMENT EXT. 1-1234

DEPARTMENT NAME Department Name

DEPARTMENT ACCT # DEPT ACCT # 6 digits

DEPARTMENT CONTACT Callme Forinfo BLDG/RM Bldg/Rm EXT 1-3456

FUND APPROVAL NAME Callme Foraccount BLDG/RM Bldg/Rm EXT 1-5678

FUND APPROVAL SIGNATURE J. Signfor Themoney

Please call 1-9939 for PPG application instructions or for generic "multi-user" card application information.

To expedite activation of the account, you may send the **b USER NAME b BADGE # b DEPT ACCT # b FUND APPROVAL NAME b DEPT CONTACT NAME b** via e-mail to expresscard@mail.mcg.edu, then mail the **original**, signed application to DA-106B. You will receive confirmation when the privilege has been activated. The card activation fee of \$5.00 will be charged to the department.

MCG ExpressCard - DEPARTMENTAL COPY PRIVILEGE APPLICATION Medical College of Georgia

DATE _____ MCG MCG HI

USER NAME _____ MCG BADGE #

DEPARTMENT ADDRESS _____ DEPARTMENT EXT. _____

DEPARTMENT NAME _____

DEPARTMENT ACCT # _____

DEPARTMENT CONTACT _____ BLDG/RM _____ EXT _____

FUND APPROVAL NAME _____ BLDG/RM _____ EXT _____

FUND APPROVAL SIGNATURE _____