



McGill

Request for a McGill ID # for External Users (Z2)

To apply for a McGill ID, fill in the information below and fax this form to Human Resources at 398-8287. **All information must be completed.**

Section 1: Applicant Information (Please Print)

Last Name: _____ First Name: _____

Date of Birth (mm/dd/yy) : _____ S.I.N: _____ Gender: _____

Campus Address: _____

Department: _____ Administrative Org: _____

Have you ever worked for McGill University: Yes _____ No _____

Have you ever studied at McGill University: Yes _____ No _____

If above questions were answered Yes, please supply McGill ID# _____

The University is governed by the **Act respecting Access to Documents held by Public Bodies and the Protection of Personal Information** which generally declares confidential the records, documents and information concerning staff and students.

I agree to respect and enforce such confidentiality and not to use without authorization or to subvert any information to which I may have access during the performance of my assigned duties at McGill.

I am aware that I shall be subject to disciplinary actions deemed appropriate should there be any breach in this regard.

Signature: _____ Date: _____

Section 2: Sponsor Information – to be completed by Dean/Director/Chair

I hereby approve the applicant's request for a McGill ID#.

Name: _____ McGill ID# _____

Title: _____ Tel: _____

Department: _____

Campus Address: _____

E-Mail: _____

Reason for McGill ID# _____

Signature: _____ Date: _____

Information Systems Resources Notified Date: _____