

VOIP USER MODIFICATION REQUEST FORM



Applicant name structure

SIA

University Information System
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c.a dott. Fabio Sangiorgi

Subject: Voip user modification request

You are hereby required to make the following **changes** to the **Voip accounts** listed below.

Number	Surname Name	Mail	Authorisation	Note
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> ----- @unipa	<input type="checkbox"/>	

Mark the boxes containing the information to be updated.

Legend **permissions**:

A = Intercom Call Enabled

B = **A** + Urban Calls

C = **B** + Interurban Calls

D = **C** + Mobile Network Calls

E = **D** + International Calls

Signature of the responsible person
