Lab Help Form
Department of Computer and Information Sciences

INDIANA UNIVERSITY SOUTH BEND
FULFILLING *the* **PROMISE**

Date:_____

Your Login ID: _____

Nature of the problem:
- ☐ Hardware
- ☐ Software
- ☐ Network Connectivity
- ☐ Lab Access
- ☐ Printer
- ☐ Others

Machine IP or Hostname: _____

Lab Number (E.g. NS209):_____

Your Name:_____

Would you like to be notified when the problem is resolved?
- ☐ No
- ☐ Yes (your email):

_____

In case of computer issues, did you log in to the designated Host via:
- ☐ Local Login
- ☐ Remotely/SSH

If this was a remote connection, what is your local IP address and were you off-campus?

_____

Describe the problem in detail:

_____
_____
_____
_____
_____
_____
_____
_____

Print and drop off this form in NS203 or NS301-A. Or email this form to cslabadmin@cs.iusb.edu

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