


AUSTIN PEAY STATE UNIVERSITY
POLICIES AND PROCEDURES MANUAL

Policy Number: 99:004	Supersedes Policy Number:
Date: April 18, 1988	Dated:
Subject: Request for List/Labels	
Initiating Authority: Vice President for Finance and Administration	SBR Policy/Guideline Reference:
Approved:  President	

Regular employees of the University may obtain lists or labels with employee names and home addresses, or APSU post office box numbers, if the information is to be used for University purposes. A budget account number must be provided with the approval of the person responsible for the account.

Procedure

The request for List/Labels form (PPM Form 99:004:a) must be completed and sent to the Personnel Office, where the employment status of the person making the request will be verified and the purpose of the request reviewed.

Lists

After approval of the request, the list will be produced in the Personnel Office. The person making the request will be notified when the list is complete. Ten working days must be allowed for this request.

Labels

A label request must be accompanied by the appropriate number of blank labels, which can be purchased at the University's Book and Supply Store. The Personnel Office can provide an estimate of the number of labels needed. An approved label request will be sent by Personnel to Computer Services, where the labels will be printed. The person initiating the request must arrange with Personnel to pick up the completed labels. Ten working days must be allowed for this request.

REQUEST FOR LIST/LABELS

Date of Request:___/___/___

Requested by:_____ Campus Phone:_____

Account No. _____ Approved: _____
Department Head

Purpose for which list/labels will be used:_____

Date Required:___/___/___ (Please allow ten working days)

Request Type: _____ List _____ Labels. Labels, available at the
University Book and Supply Store,
must accompany the request.

Number of Copies Needed:_____

Employee Type: _____ All Employees _____ Faculty _____ Administrators
_____ Clerical _____ Support _____ Students
_____ Other (Describe)

Information Required: _____ Employee Name _____ APSU P.O. Box Number
_____ Home Address

Approved:_____ Date:_____
Personnel Representative

Z Writer List Request/Run:_____

Label Request to Computer Services:_____ Date

FOR COMPUTER SERVICES USE ONLY

Time Processed:_____ Time Received:_____

Entry Number _____ Operator _____

Report Picked Up By:_____ Date:_____

White - Computer Services, Yellow - Personnel,
Pink - Department Requesting List/Labels