**OFFICE/ STAFF MOVES**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **JOB REQUESTED BY:** |  |  |  |  |  |  |  |  |  |
| Name: | Ext.no: | Location: | Dept: | Room no: | Date: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **STAFF RE-LOCATING** |  |  |  |  |  |  |  |  |  |
| Name: | Ext.no: | Socket no: | Moving From (Building): | Room no: | Moving To (Building): | Room no: | Socket no (if available): | Is socket live?  Y/N | If live, extension no if known: |
|  |  |  |  |  |  |  |  |  |  |
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| **DATE OF MOVE:** |  |  |  |  |  |  |  |  |  |
| **COST CODE:** |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

**NB: IF ADDITIONAL PHONES/ LINES ARE REQUIRED PLEASE COMPLETE THE ‘REQUEST FOR ADDITIONAL PHONE LINES’ FORM.**

**Email completed forms to: Telexchange@kent.ac.uk**

**Incomplete/ incorrect request forms may be returned**