Friedrich-Alexander-Universität
Regionales Rechenzentrum Erlangen

Application for IdM Identification of FAU

Regionales Rechenzentrum Erlangen (RRZE) ■ Martensstraße 1 ■ 91058 Erlangen

Rückfragen bitte an: rrze-zentrale@fau.de

☐ First-time registration ☐ Subsequent registration	Requested expiration date: . .	Previous IdM-I.D. (if applicable):

Information concerning the user

Full first name:		Title:	
Last name:		Name affix:	
Place of birth:		Date of birth:	
Nationality:		Sex:	☐ male ☐ female ☐ unspecified

Kontaktadresse	**Address of FAU-Organizational Unit** Place of employment, if FAU organizational Unit has several addresses	**Delivery address (reliable)** Home address or company address
Name:		
Address (opt.) / Room number:		
Street, Number:		
ZIP, City:		
Country:		
Phone:		
Email:		

I hereby confirm the accuracy of the information above.

Place, date: Signature (User): ……..

Information concerning the FAU-Organizational Unit

Employing / contracting / hosting / cooperating unit of the FAU

Number of FAU Organizational Unit:

RRZE-customer number:

Information concerning the type of user

Please select only **one** type of user:

Employee:
- ☐ Employee (soon-to-be)
- ☐ Employee (former)
- ☐ Employee (volunteer)

Student:
- ☐ Student (early start date)
- ☐ Student (associated by cooperation)

Other:
- ☐ Lecturer (guest)
- ☐ Researcher (guest)
- ☐ Trainee
- ☐ Individual on secondment
- ☐ Service partner
- ☐ Employee of external customer
- ☐ Other

Please attach the required documents for service tendering (contracts, certificates, etc. as appropriate) to the application. Details can be found under: **www.idm.fau.de/aim/docs/affiliations**
(Column "Basic information on service tendering")

Explanation of the choice of the user type (If requested in the column "References"):

IdM-I.D. of IdM-point of contact:	IdM-point of contact (name in plain text):
Name/Stamp of the FAU Organizational Unit:	Place, Date: Signature (IdM-point of contact): ……

To fill in by the IdM-point of contact or by the employee of the RRZE-Service-Theke

Only for first-time registrations

Identification documents checked: ☐ I.D. card ☐ Passport ☐ Permit of residence Identif. number: ……	Other documentation: ☐ Employment contract ☐ …… ☐ …… ☐ ……
The IdM-point of contact or employee of the RRZE-Service-Theke has verified that all information concerning the user including the presented documents of identification are correct.	IdM-point of contact or employee of the RRZE (name in plain text): …… Signature (IdM-point of contact or employee of the RRZE-Service-Theke): ……

RRZE-internal notes (to be filled in by the RRZE-Service-Theke)

Employee of the RRZE (name in plain text): ……

Information / Attachments / Case number: