Network File Recovery Form

Print this form and return when completed to Network Support in Justin 122A.

User Name: _____

Department: _____

Telephone: _____

Location: _____

Location of File(s)/Directory   Home   Shared   Workarea

Name of File(s)/Directory _____

Date File Deleted: _____

Backup You Would Like The File(s) Restored From: Last Available Backup   Other: _____

Comments: _____

_____

_____