

**Guilford County Schools  
Technology Center – Help Desk  
GCSNET Password Reset Request Form**

Name: \_\_\_\_\_

School/Site: \_\_\_\_\_

Day Phone: \_\_\_\_\_

GCSnet User Logon Name: \_\_\_\_\_

Last 4 Digits of Social Security Number: \_\_\_\_\_

Approximate Date of Last Login: \_\_\_\_\_

- I forgot my password. Please assign me a new password.
- My password does not work; please reset my password to my suggestion.
- I would like you to change my password to:

Password suggestion: \_\_\_\_\_

**(Must** be 6-8 characters long, preferably letters and numbers)  
If you do not suggest a password, one will be assigned to you.

Signature: \_\_\_\_\_

**☞ Send this form to: Technology Center, Prescott St.  
Attention: Help Desk**

**This form will be returned to you with confirmation of  
your new password**

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