Network Information Questionnaire

To better help the IT Department troubleshoot your internet issues, please follow the quick troubleshooting steps and fill out the fields below.

- Name:

- Residence Hall :

- Room Number:

- Type of connection:

1. Head to fast.com and let the speed test run on your device and fill out the information requested (click the Show more info button to see details):

    a. Internet Speed (Down):

    b. Upload Speed:

    c. Unloaded Latency:

    d. Loaded Latency:

    e. Time test was ran:

2. What device or devices do you notice the network issues with (PC, Phone, Game Console)?

    a. Device Type(s):

3. What time do you usually experience network issues (ex. 4:00 – 5:00 PM)?

    a. Time frame:

4. Are there any others that are experiencing the same issues?

    a. Yes

    b. No

    c. Unsure