



Research Service

Computer Access Request

To be completed by employee

<i>First Name</i>	<i>Middle Initial</i>	<i>Last</i>
<i>Title</i>		<i>Phone Ext.</i>
<i>Social Security Number</i>		<i>Date of Birth</i>
<i>Computer Functions you wish to have access to</i>		
Network access <input type="checkbox"/> Outlook Mail <input type="checkbox"/> CPRS <input type="checkbox"/> Reactivation <input type="checkbox"/>		
Other (be specific):		
<p>I understand that I am personally accountable for my actions and that I must:</p> <ul style="list-style-type: none"> • Protect sensitive information from disclosure • Acquire and use sensitive information only in accordance with performance of my official duties • Protect information security, my computer and my access codes • Report security incidents and vulnerabilities to the Information Security Officer (ISO) • Comply with all copyright licenses associated with VA resources • Computer with the personal use of government equipment site policy <p>I understand that management has the right to monitor, intercept, read, record and copy all information attributable to my access.</p>		
<i>Signature</i>		<i>Date</i>
Requested <input type="checkbox"/>		Date
<i>ADPAC Signature</i>		