



REMOTE CONNECTIVITY ACCESS FORM

Policy Non-Compliance Notice: Failure to comply with AP 7540K - Remote Connectivity Access Procedure may result in the suspension of remote access privileges and/or disciplinary action. Please fill out this Form 7540K F1 to request remote connectivity access

Date of Request: _____

School/Department: _____

User Name: _____ User ID: _____

User's Title: _____ Primary Function: _____

User's E-Mail: _____ User's Phone: _____

Reason for Request: _____

User's Signature: _____ Date: _____

Approved by Site Tech/Site Manager:

Date: _____

VPN: _____ Dial-In: _____ Terminal Service: _____

To be Completed by Educational Technology:

Approved By Director of Educational Technology: _____

Date: _____

Processed by: _____ Date: _____

VPN Information: Group: _____

Security Verified YES/NO (e.g., personal firewall): _____

Notes: _____
