



## Virtual Private Network (VPN)

### User Access Request

Fill in all the following information. **Incomplete forms will not be processed.**

- Add New Employee    
  Add New Contractor\*    
  Change Access    
  Remove Access

\* If a new contractor, a contractor supplemental form must be completed

<i>Employee's Last Name</i>	<i>Employee's First Name</i>	<i>Employee's Middle Initial</i>	
<i>Employee's e-mail Address</i>		<i>VPN Account Expiration Date</i>	

<i>Work Location</i>		<i>Dept/Div</i>	
<i>Social Security Number (last four digits only)</i>		<i>Telephone Number</i>	

<i>Business Justification</i>	
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<i>Existing VPN Group?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>YES</b> , please provide the VPN group name?	

By digitally signing below you acknowledge that it is your responsibility as the department IT administrator to ensure that the employee named in this document has read and will abide by the VPN Access Policy and the Acceptable Use Policy. Failure to comply with the VPN Access Policy and the Acceptable Use Policy may result in termination of the user's VPN account and disciplinary action including termination of employment and legal action.

It is the responsibility of the department IT representative to notify DT Security Services immediately upon termination of the employee or to have VPN service discontinued. Failure to notify DT Security Services could lead to a serious security breach and will result in the immediate suspension of the user's VPN account and/or changing of the group password.

<input type="checkbox"/>	<i>IT Representative's Name</i>	<i>Physical or Digital Signature</i>	<i>Date</i>



<b>DT System Security Use Only</b>			
<b>Reviewed by:</b>			
<b>Date:</b>			
<b>Comments:</b>			
<b>Groups:</b>			

Completed forms can be sent as an e-mail attachment from the authorized IT Manager/LAN Administrator of the department. Forms will be accepted via email only.

Send completed form

To: DT Help Desk .  
1 South Van Ness 2 nd Floor  
San Francisco, CA. 94103

or via E-mail

To: DTIS.HelpDesk@SFGOV.ORG  
Subject: VPN Access for : (name)