

Medical University of South Carolina
Center for Computing and Information Technology
Policy and Procedure

Subject: MUSC Third Party Connection Request Information Requirements Document

In accordance with the [Partner Connection Policy](#), all requests for third party/partner connections must be accompanied by this completed *Information Requirements Document*. This document should be completed by the person or group requesting the partner's connection.

A. MUSC Point of Contact Information

1. Administrative Contact

Name:
Department:
Phone Number:
Email Address:

2. Technical Contact

Name:
Department:
Phone Number:
Email Address:

B. Business Need

- What is the desired end result?
- How is the business need for the proposed connection justified?

C. Scope of Needs

- What [services](#) are needed?
- What are the privacy requirements (e.g. is encryption needed)?

- What are the bandwidth needs?
- How long is the connection needed?
- Other current requirements, if any?
- Other future requirements, if any?

D. Partner Company Information

- Technical contact (Name, Phone number, Email address)
- Backup Technical contact (Name, Phone number, Email address)
- Management contact (Name, Phone number, Email address)
- Employee(s) (Name, Phone number, Email address) at partnering company who will use this access
- Location (address) of termination point of partner connection
- Host/domain names of Partner company

E. Authentication and Auditing of Partner Connection

- What system will be used for authenticating users of the partner connection?
- Does the authentication system meet the [auditing requirements](#) specified in the MUSC Partner Connection Policy?

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