

## VISN7 Computer Access Request Form Request and Authorization for Computer Access

**THIS INFORMATION IS TO BE FURNISHED BY THE APPLICANT (PLEASE PRINT LEGIBLY)**

1) LAST NAME	2) FIRST NAME	3) MIDDLE INITIAL	4) NICKNAME
5) SERVICE LINE	6) DATE OF BIRTH	7) MAIL CODE	8) PHONE/EXT (incl area code)
9) POSITION TITLE	10) SSN ____/____/____	11) DUTY LOCATION/STATION NO.	

12) **VAMCs YOU ARE REQUESTING ACCESS TO:**

- Atlanta, GA
- Augusta, GA
- Birmingham, AL
- Central Alabama (Montgomery/Tuskegee)
- Charleston, SC
- Columbia, SC
- Dublin, GA
- Tuscaloosa, AL
- Other \_\_\_\_\_

13) **TERMINATION DATE:** \_\_\_\_\_  
(Default date for remote accounts is 365 days)

14) **SEX:** \_\_\_ Male \_\_\_ Female

15) **TYPE OF EMPLOYMENT: (check one)**

- Civil Service
- Research Associate
- Contractor
- Resident/Student
- Temporary/Consultant
- Other \_\_\_\_\_

16) **TYPE OF ACCESS REQUESTED:**

- VISTA (DHCP)
- PC/Network/NT Access
- Outlook Account -Requires: [Pager # \_\_\_\_\_] [Fax #: \_\_\_\_\_]
- Dial-up Access: \_\_\_\_\_
- Other System: \_\_\_\_\_

17) **REACTIVATION:** YES NO

18) Primary Menu Option: \_\_\_\_\_

19) Secondary Menu Options \_\_\_\_\_

20) Security Keys Needed: \_\_\_\_\_ 21) File Manager Access Level: \_\_\_\_\_

Patient Care Providers Only:	22) HCFA Subspecialty: _____	23) User Class: VA Code - V _____
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24) Reason and instructions for Request: \_\_\_\_\_

25) Requestor Signature: \_\_\_\_\_

**REQUIRED SIGNATURE BY THE REQUESTOR'S SUPERVISOR SYSTEM FUNCTIONAL/PROGRAM MANAGER:**

26) Approving Official Printed Name:	27) Approving Official Signature:	28) Telephone/Ext:
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**FORWARD TO YOUR LOCAL INFORMATION SECURITY OFFICER FOR APPROVAL**

29) Approving ISO Signature:	30) ISO Station Assignment:	31) Date of Security Training:	32) Access Agreement on File: (Circle one) YES NO
33) Date Access Setup/Request Completed:	34) Completed By:	35) Notes:	

**Department of Veterans Affairs**  
**VISN7 Network**  
**Automated Information System User Access Notice**

"As an authorized user of the Veterans Health Administration (VHA) computer systems, I will be given access privileges to Federal data and computer systems, especially those systems within or accessible by VHA staff including remote systems such as the Internet, Forum and Austin, to perform the duties of my job. I understand the following policies apply to these data and computer systems:

- (1) I will safeguard the security code(s), (e.g., VISTA access and verify codes) given to me. I may use my access security codes in the performance of my official duties. I may not exceed the access authority provided by my security codes. I acknowledge that I am strictly prohibited from disclosing my security code(s) to anyone for any reason except to the facility Information Security Officer (ISO), VHA ISO or Regional ISO. This includes my family, friends, fellow workers, supervisors, and subordinates.
- (2) I acknowledge that I am not to use anyone else's security code(s) to obtain access to VA or other Federal computer systems. I understand that I will be held accountable for all work performed or changes made to the system and/or databases under my security code(s) and that I am not to allow anyone else to access a computer system using my security code(s).
- (3) I understand that all data to which I may obtain access is and will remain the property of VA. I understand that, as an employee, I have an obligation to protect data and information which the loss, misuse, or unauthorized modification of or unauthorized access to could adversely affect the conduct of VA or other Federal programs. Further, I am aware that information about individuals, including my own record, is confidential and must be protected by law and regulations from unauthorized disclosure.
- (4) I understand that VA electronic mail is to be used for official government business only. I am not authorized to use electronic mail either for personal messages not related to the performance of my official duties or in lieu of personal telephone calls.
- (5) I understand that the ISO and computer staff will monitor the amount, types and contents of Internet access or messages sent by individuals on electronic mail, and that reports will be generated regularly about how Internet access and electronic mail is used by individual employees, including myself.
- (6) I understand that improper access to, or unauthorized modification or disclosure of data (obtained through the computer or otherwise) may subject me to the imposition of criminal penalties and/or disciplinary or adverse action, as appropriate, under VA employee conduct regulations. Similarly, if I exceed my computer system access authority or use that authority to engage in conduct outside the scope of my official duties, I may also be subject to disciplinary or adverse action as appropriate, even criminal prosecution.
- (7) I understand that I am not to use my access authority to a VA or other federal computer system, particularly electronic mail, for any purpose other than performance of my official duties. Specifically, I may not access, disclose or change data except as authorized by VHA officials, including my supervisor, ISO, and computer staff.
- (8) I understand that I may have disciplinary or adverse action, as appropriate, taken against me and may be prosecuted if I use VHA computer systems or resources for any purpose other than performance of VA business within the scope of my official duties.
- (9) I affirm that I have read and understand the provisions and intent of this notice and the importance of preserving computer access security.
- (10) Unless and until I am released in writing by an authorized representative of the Department of Veterans Affairs, I understand that all conditions and obligations imposed upon me by this notice apply during the time I am granted access to a VA or other Federal computer system and at all times thereafter."

Computer User's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Computer User's Printed Name: \_\_\_\_\_