VAAL UNIVERSITY OF TECHNOLOGY
Inspiring thought. Shaping talent.

IT SERVICES REQUEST FOR VPN ACCESS

APPLICANT DETAILS

TITLE, INITIALS, SURNAME: _____

EMPLOYEE NO   : _____

DEPARTMENT   : _____

EMAIL   : _____

ACCESS DETAILS

Application Name - *Select your required service(s) below.*		
Phone		
Servicedesk		
ITS Integrator		
ITS Test		
Techsys		
SMS		
Other Services - *Enter the Server addresses below.*		

Access Duration:

Start Date: _____   End Date: _____

MOTIVATION (Type the reason for your request in the text box below).

[   ]

Unauthorized or inappropriate use of the VPN is equivalent to an infringement of the University's IT policy. A VPN connection will be immediately disconnected and disabled if any suspicious activity is observed within that connection. The account holder will be held liable for any IT violations emanating from the use of this account. This account must not to be used on any public computers e.g., Internet Café/Library. The VPN account is strictly for official VUT business use only.

_____
SIGNATURE
APPLICANT

_____ DATE

_____
SIGNATURE
DVC/EXEC DEAN/EXEC DIRECTOR/SNR
DIRECTOR/REGISTRAR

_____ DATE

_____
IT ADMINISTRATOR