

Secure Data Access Approval Form

Applicant Section

In order to obtain authorization to access enterprise data from an off campus and/or machine not managed by DSP all sections must be complete. The Secure Data Authorization Process documentation is located on the Web at

<https://answers.syr.edu/x/W4RFAw>

- For specific information on Policy 004.001, Secure Remote Access, see http://supolicies.syr.edu/it/remote_access.htm
- For specific information on Standard for Secure Remote Access to Enterprise Applications see <https://answers.syr.edu/x/0YE9Aw>

Download and print this page. Complete this section and ask your Department Authorizer to sign the next section. A list of department authorizers can be found at: <https://answers.syr.edu/x/ZYRFAw>

Applicant Name:	Applicant Signature:	SUID #
Machine Name	Date Requested	Training Date

By signing this form, you agree to abide by all of the relevant policies and comply with the required standards.

Authorizer Section

Some departments require more than one authorization signature such as a Dean or VP. The Authorizer(s) will determine whether or not the applicant should be given permission to access enterprise data from a remote location. When approved the authorizer will determine which type of training is required for the employee.

Authorizer name (print)	Authorizer signature	Authorization status Approved Denied	Date
Authorizer name (print)	Authorizer signature	Authorization status Approved Denied	Date

Type of Access requested

Secure VPN Access	
DatAnywhere Access with Synch	

When approved, the Authorizer(s) will sign the form and have the employee return it to the Information Coordinator for further processing.

If denied, the Authorizer will inform the applicant that the request has been denied.

Information Coordinator Section

Once the applicant and authorizer signatures have been obtained, the Information Coordinator will sign and file this form locally. The IC will process this request by creating an entry in FAST using Prod Remote Access form.

Information Coordinator name (print)	Department	Date
Information Coordinator signature	Title	