

VPN Access Request Form

Doc. Control Number	Version
SNL-65	0.2



VPN Access Request Form

1-	Employee Information:
	- Full Name:
	- Employee ID:
	- Department:
	- Job Title:
	- Email Address:
	- Phone Number:
2-	Reason for VPN Access:
	☐ Remote Work
	☐ Business Travel
	☐ Access to Restricted Resources
	Other (please specify):
3-	Duration of Access:
	☐ Temporary (specify dates):
	□ Permanent
4-	Supervisor Approval:
	- Supervisor's Full Name:
	- Supervisor's Email:
	- Supervisor's Phone Number:
	- Supervisor's Signature:
	- Date:
5-	IT Department Approval:
	- IT Department Contact:
	- IT Department Email:
	- IT Department Phone Number:
	- IT Department Signature:
	- Date:
6-	Additional Comments/Notes:

7- Instructions:

- Fill out this form completely and accurately.
- Obtain approval from your supervisor.
- Submit the form to the IT department for processing.
- Once approved, you will receive instructions on how to set up and use the VPN.

Note: VPN access is granted solely for business purposes. Unauthorized use of the VPN is strictly prohibited.