

## SSL VPN Access Request - Appendix A

Note: Incomplete request forms will be returned without processing. Requestors will be provided with a decision within 10 working days from receipt of the completed request. Send completed request forms to [it-services@northwestern.edu](mailto:it-services@northwestern.edu)

Name of Requestor:	Date:	
Dept:	Phone:	
Address:	E-mail:	
Identify Customer/Requestor Contact:		
Identify users who need access to the SSL VPN (Full name and NetID's):		
Explain why the alternative remote access is required and what applications are being protected:		
How long will the alternative remote access be required?		
Disposition	Date	Notification