Annex A – Access Control Form (CCO Wide Area Network)

APPLICANT

Surname	Given Name(s)	Service Number or PRI	Rank

Home Address			Home Telephone

City	Province	Postal Code	Daytime Telephone

UNIT

UIC	Location	Appointment / Position

Additional Information

USER ATTESTATION

1. I shall only use the system and information resources in direct support of authorized activities;
2. I shall not do any of the following without the explicit written authorization of the ISSO:
    a. Introduce, produce or modify IT executable instructions, including software, command procedures, and configuration control;
    b. Add, move or change communications equipment or IT assets; and/or
    c. Move or remove any hardware, communications, or software items from DND property (either temporarily or permanently);
3. I will not disclose or share with anyone any user-IDs, passwords, and/or access control items;
4. I shall report all security incidents to the ISSO immediately;
5. I shall observe all restrictions which limit my access to specific locations, times, systems, files and programs;
6. I shall respect all copyright and licence agreements for all software and data;
7. I shall backup all critical programs and data as directed by the IS manager;
8. I shall not allow unauthorized persons access to the system resources;
9. I shall not introduce any information to the system for which all other users are not cleared or screened to access, or any information which all other users do not share a common need-to-know;
10. I understand that DND IS can and will be monitored to ensure compliance with applicable rules and regulations; and
11. I understand that any violation of the spirit or intent of the rules and regulations can lead to administrative or disciplinary action.

By signing I confirm that I have read and understood the IS Security Orders and shall comply with the rules and regulations.	_____ User Signature	_____ Date

INTERNAL USE ONLY

User ID	Security Clearance	Expiration

User Rights	Expiration

Processed	Date