UMC	Security	Submit Requests To:						
HEAL SYST	EM University Mee	dical Center Information Tech	nnology	Ver.04.08	Attention : Greg Milford - ISO Fax : (806) 775-9116 Email : iso@teamumc.com			
All fields are required unless otherwise denoted with an asterisk (*). Incomplete or illegible information may cause processing delays.								
DATE :	2010 REQ TYPE		CHANGE / UPDATE	TRANSFER	CONTRACT Ves No			
REQ :	2010 EMPLOYER	имс 🔘	PNS TTUHSC	OTHER				
SSM	۱		DEPARTMENT					
NAME	E		JOB TITLE					
LAST EMP	*		_ COST CENTER _		NURSING LIC			
SUP NAME	E		EMAIL					
OFFICE	E		FAX *					
Physicians and Third Party: Please provide your contact information above in liue of the requested supervisor contact information.								
GENERAL *	REMOTE ACCESS *	[REQUEST NON-STANDARD SECURITY OR ADD DETAILS TO AID IN PROCESSING THIS REQUEST]						
	CITRIX PORTAL							
EMAIL								
	O DIRECT DIAL-UP							
	By signing, you are a	knowledging that you un	iderstand and agree to ab	oide by the following pol	icies :			

Employee / Requestor

•• I will hold as confidential and secure all patient, personnel, financial & administrative information, communications and any other information made confidential by law or UMC policy.

Patient information will be accessed on a need-to-know basis only.
I will use email and Internet access only in accordance with UMC

policy. Email is subject to review by management.
Access to patient information will be audited on a random basis to

determine potential breaches of confidentiality. •• Any breach of confidentiality will result in disciplinary action that

may include immediate termination of employment.

Supervisor

Security has been defined for specific positions based on the functions performed within the respective department. These roles and privileges are defined in the Information Technology Security Listing available on request or at the UMC Intranet site (http://umcintranet). Any additional requested system accounts listed here will processed and granted with your approval.
 When an employee under your supervision no longer needs access to UMC systems, either due to position change or termination, you will notify the UMC Information Security Officer through email, signed fax, or UMC's "Termination/Status Change Notification", available to Department Directors at the UMC Intranet site.

Employee / Requestor Signature

Supervisor Signature

>>>> THIS SECTION IS FOR INFORMATION TECHNOLOGY USE ONLY < < < <								
PROCESSED: /	/BY:		USERNAME:					
ACCESS GRANTED :								
NOTIFIED USER / SUPERVISOR ON: / BY:: VIA: EMAIL PHONE FAX								