

Server Access Request Form	Date and Time of Submission:
-----------------------------------	-------------------------------------

Site Access Form

Employee Name: _____

Email ID: _____

Designation: _____

Deptt: _____

Reporting officer: _____

Employee Location: C-62 Others:

Access Needed:-----

Purpose of Access: _____

Approved By:

Employee Signature

(Division Head)

-----To be used by IT Department -----

Received By:

Name: _____

Emp ID: _____

Signature: _____

Date: _____

Signature
(IT Manager)

Approved By: COO	Form Number: QMS-IFT-SAF 01	Security Classification: Confidential	Page 1 of 1
----------------------------	---------------------------------------	---	--------------------