

**Valdosta State University Request for External Campus Network Access**  
Route to Office of Information Security in Information Technology Division

Submission Date:	
Applicant:	
Office Number:	
Email Address:	
Emergency Number:	
Requesting Department/Unit:	
Computer Hosting Requested Port(s):	
Port Number(s) Requested:	
System Administrator Responsible For Computer:	
Hosts Attaching to Ports:	
Purpose of Port Request:	

I am making the above request in an effort to promote the mission and goals of Valdosta State University and/or the mission and goals of the University System of Georgia. By making this request, I understand that I am responsible for ensuring that all software is kept patched and secured to the best of my ability. Furthermore, I understand that if the hosting computer poses a threat to the remainder of the campus computers or equipment, the office of Information Technology may remove the computer from the network until the threat no longer exist.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Immediate Supervisor's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Reason(s) for disapproval: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_