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(for IT operations use only)

Information Technology
Roanoke Chowan Community College

R-CCC VPN Access Request Form

(Faculty and Staff use only)

Use this form to request access to Roanoke Chowan Community College's **VPN network.** You will be notified via e-mail within 48 hours of approval or denial. Login using your NetID and password.

Please bring your completed form **and photo ID** to IT department

Applicant's Information (please PRINT clearly):

Name: _____ **Campus Phone:** _____
Last First MI

Department: _____

Campus E-mail: _____

R-CCC ID Number: NetID: _____

Status: ☐Faculty ☐Staff Other: _____ **Campus:** _____

Please provide a *detailed* explanation of VPN need and how it cannot be met otherwise:

_____

_____

_____

_____

Your signature indicates that:

- You have read and agree to abide by all of The Roanoke Chowan Community Colleges acceptable use policies located at http://www.roanokechown.edu

NOTE: VPN access is available on an annual basis through September 30 unless noted above in the detailed explanation. Re-authorization must be approved by the Dean/Director or the account will be deactivated.

Applicant's Signature:_____ **Date**:_____

Dean/Director

Signature:_____ **Date:**_____

E-mail: _____
Please print

For IT internal use only:

	Section	Completed By	Date	Comments
ID verified	IT			Deliverer name:
Created by	IT			
Notified By	IT			

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