

REMOTE ACCESS REQUEST FORM

Section 1 End User Information: State Employee Non-State Employee

End User's Last Name

First Name

Sponsor Agency/Division*

EIN # (If ADOA Employee)

Phone Number

Email

Address to ship to (Required):

I acknowledge the applicable State of Arizona policies, including: <https://aset.az.gov/resources/policies-standards-and-procedures>, sections 8280 Acceptable Use, 8320 Access Controls, and 8340 Identification and Authentication.

End User's Signature

Date

Section 2 Agency Sponsor Section - Remote Access Request(s) and Authorization

Please make your selection(s):

VPN Account

TACACS (For technical staff only, must also be approved by EIC staff)

PON: (Required) _____ SubPON: _____

Sponsor Agency Address: _____

ADD VPN Account

Token Type: Soft Token: (User must select a soft token to be delivered electronically)
 Hard Token: (User must select a hard token/FOB)

CHANGE VPN Account

Details:

DELETE VPN Account

For hard token users, please provide the serial # of the token:

You may mail the token to Centurylink/AZNet II, 20 East Thomas, 6th Floor, Phoenix, AZ 85012, or ask an AZNet II Technician to return them for you.

I acknowledge that I am responsible for notifying the AZNET Support Desk if the end user listed above transfers to another agency, terminates employment, or no longer requires the Remote Access account(s). I also acknowledge that, in the event of a VPN account being deleted, I am responsible for retrieving the Hard Token from the User, or validating that this User did not have a Hard Token to retrieve.

Authorizing Agency Sponsor Name

Authorizing Agency Sponsor Signature

Date

Sponsor Agency - E-mail the completed form to AZNET Support Desk at AZNetSupportDesk@AZDOA.gov.

*If your agency is not listed, contact the AZNet Support Desk at 602-364-4444 or AZNetSupportDesk@azdoa.gov.